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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
<b>Product Name:</b>	2023 DC ALIC PPO SG		
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC		

## Filing at a Glance

Company:	Aetna Life Insurance Company
Product Name:	2023 DC ALIC PPO SG
State:	District of Columbia
TOI:	H16G Group Health - Major Medical
Sub-TOI:	H16G.003A Small Group Only - PPO
Filing Type:	Rate
Date Submitted:	05/02/2022
SERFF Tr Num:	AETN-133247387
SERFF Status:	Assigned
State Tr Num:	
State Status:	
Co Tr Num:	DCALICSG2023
Effective	01/01/2023
Date Requested:	
Author(s):	Laura Stouter, Joanna Kluza, Michelle Wanner, Su Yong Song, Aaron Cornett
Reviewer(s):	Dave Dillon (primary), Efren Tanhehco
Disposition Date:	
Disposition Status:	
Effective Date:	
State Filing Description:	

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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
<b>Product Name:</b>	2023 DC ALIC PPO SG		
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC		

## General Information

Project Name: 2023 Exchanges - Aetna  
Project Number: ALIC  
Requested Filing Mode: Review & Approval  
Explanation for Combination/Other:  
Submission Type: New Submission  
Group Market Type: Employer  
Filing Status Changed: 05/02/2022

Status of Filing in Domicile:  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Group  
Group Market Size: Small  
Overall Rate Impact: 5.01%

State Status Changed:  
Created By: Joanna Kluza

Deemer Date:  
Submitted By: Joanna Kluza

Corresponding Filing Tracking Number: 77422-2003721964618918925

PPACA: Non-Grandfathered Immed Mkt Reforms

PPACA Notes: null

Exchange Intentions:

Includes forms for products to be offered to Small Groups on the DC Health Benefits Exchange.

Filing Description:

Aetna Life Insurance Company 1Q23 Small Group PPO rate filing for DC.

The corresponding forms filing was submitted separately. The SERFF ID Number is AETN-133139939.

## Company and Contact

### Filing Contact Information

Joanna Kluza, Actuarial Analyst  
151 Farmington Ave  
Hartford, CT 06156

KluzaJ@aetna.com  
860-273-0099 [Phone]

### Filing Company Information

Aetna Life Insurance Company  
151 Farmington Avenue  
Hartford, CT 06156  
(860) 273-0123 ext. [Phone]

CoCode: 60054  
Group Code: 1  
Group Name:  
FEIN Number: 06-6033492

State of Domicile: Connecticut  
Company Type:  
State ID Number:

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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
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## Filing Fees

### State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
<b>Product Name:</b>	2023 DC ALIC PPO SG		
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## Rate Information

Rate data applies to filing.

<b>Filing Method:</b>	Review & Approval
<b>Rate Change Type:</b>	Increase
<b>Overall Percentage of Last Rate Revision:</b>	8.780%
<b>Effective Date of Last Rate Revision:</b>	01/01/2022
<b>Filing Method of Last Filing:</b>	Review & Approval
<b>SERFF Tracking Number of Last Filing:</b>	AETN-132731328

## Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Aetna Life Insurance Company	Increase	5.010%	5.010%	\$-184,974	122	\$814,182	8.660%	-2.350%

**State:** District of Columbia **Filing Company:** Aetna Life Insurance Company  
**TOI/Sub-TOI:** H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO  
**Product Name:** 2023 DC ALIC PPO SG  
**Project Name/Number:** 2023 Exchanges - Aetna/ALIC

## Rate Review Detail

### COMPANY:

Company Name: Aetna Life Insurance Company  
HHS Issuer Id: 77422

### PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
DC ALIC PPO SG	77422DC011	77422-2003721964618918925	157

Trend Factors:

### FORMS:

New Policy Forms: AL DC SG-HIXSOB-14050619 V007 ,AL DC SG-HIXSOB-14050613 V007 ,AL DC SG-HIXSOB-14050616 V007 ,AL DC SG-HIXSOB-14051067 V007 ,AL DC SG-HIXSOB-14051068 V007 ,AL DC SG-HIXSOB-14051066 V007 ,AL DC SG-HIXSOB-14050614 V007 ,

Affected Forms:

Other Affected Forms:

### REQUESTED RATE CHANGE INFORMATION:

Change Period: Quarterly  
Member Months: 2,028  
Benefit Change: None  
Percent Change Requested: Min: -2.35 Max: 8.66 Avg: 5.01

### PRIOR RATE:

Total Earned Premium: 999,156.00  
Total Incurred Claims: 900,604.00  
Annual \$: Min: 354.12 Max: 545.06 Avg: 530.34

### REQUESTED RATE:

Projected Earned Premium: 814,182.00  
Projected Incurred Claims: 830,095.00  
Annual \$: Min: 345.80 Max: 592.26 Avg: 556.91

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
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## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		DC SG ALIC PPO 2023	AL DC SG-HIXSOB-14050619 V007, AL DC SG-HIXSOB-14050613 V007, AL DC SG-HIXSOB-14050616 V007, AL DC SG-HIXSOB-14051067 V007, AL DC SG-HIXSOB-14051068 V007, AL DC SG-HIXSOB-14051066 V007, AL DC SG-HIXSOB-14050614 V007	Revised	Previous State Filing Number: AETN-132731328 Percent Rate Change Request: 5.01	DC_SG_77422_Rates_ON_1Q2023_v1.xls, DC_SG_77422_Rates_ON_1Q2023_v1.pdf, DC_SG_77422_Rates_ON_2Q2023_v1.pdf, DC_SG_77422_Rates_ON_3Q2023_v1.pdf, DC_SG_77422_Rates_ON_4Q2023_v1.pdf,

<b>SERFF Tracking #:</b>	AETN-133247387	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	DCALICSG2023
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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company		
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO				
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**Attachment DC\_SG\_77422\_Rates\_ON\_1Q2023\_v1.xls is not a PDF document and cannot be reproduced here.**

2023 Rates Table Template v12.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*		77422			
Rate Effective Date*		1/1/2023			
Rate Expiration Date*		3/31/2023			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	15	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	16	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	17	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	18	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	19	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	20	407.04	407.04
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	21	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	22	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	23	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	24	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	25	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	26	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	27	452.47	452.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	28	463.05	463.05
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	29	473.01	473.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	30	484.83	484.83
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	31	497.28	497.28
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	32	508.48	508.48
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	33	520.31	520.31
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	34	532.76	532.76
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	35	545.20	545.20
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	36	557.65	557.65
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	37	570.10	570.10
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	38	576.95	576.95
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	39	583.79	583.79
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	40	606.82	606.82
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	41	630.47	630.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	42	655.37	655.37
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	43	680.88	680.88
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	44	707.65	707.65
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	45	735.03	735.03
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	46	763.66	763.66
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	47	793.53	793.53
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	48	824.65	824.65
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	49	857.02	857.02
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	50	890.62	890.62
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	51	925.48	925.48
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	52	961.58	961.58
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	53	998.92	998.92
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	54	1038.13	1038.13
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	55	1078.58	1078.58
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	56	1120.91	1120.91
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	57	1164.47	1164.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	58	1209.91	1209.91
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	59	1257.21	1257.21
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	60	1306.37	1306.37
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	61	1357.35	1357.35
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	62	1357.35	1357.35
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	63	1357.35	1357.35
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1356.72	1356.72
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	15	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	16	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	17	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	18	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	19	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	20	401.95	401.95
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	21	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	22	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	23	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	24	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	25	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	26	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	27	446.82	446.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	28	457.27	457.27
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	29	467.10	467.10
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	30	478.78	478.78
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	31	491.07	491.07
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	32	502.13	502.13
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	33	513.81	513.81
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	34	526.10	526.10
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	35	538.39	538.39
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	36	550.69	550.69
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	37	562.98	562.98
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	38	569.74	569.74
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	39	576.50	576.50
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	40	599.24	599.24
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	41	622.59	622.59
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	42	647.18	647.18
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	43	672.38	672.38
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	44	698.81	698.81
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	45	725.85	725.85
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	46	754.12	754.12
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	47	783.62	783.62
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	48	814.35	814.35
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	49	846.31	846.31
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	50	879.50	879.50
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	51	913.92	913.92
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	52	949.56	949.56
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	53	986.44	986.44
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	54	1025.16	1025.16
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	55	1065.11	1065.11
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	56	1106.90	1106.90
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	57	1149.92	1149.92
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	58	1194.79	1194.79
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	59	1241.50	1241.50
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	60	1290.05	1290.05
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	61	1340.39	1340.39
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	62	1340.39	1340.39
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	63	1340.39	1340.39
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1339.78	1339.78
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	15	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	16	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	17	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	18	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	19	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	20	415.91	415.91
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	21	462.33	462.33
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	22	462.33	462.33
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	23	462.33	462.33
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	24	462.33	462.33



	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	25	462.33	462.33
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	26	462.33	462.33
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	27	462.33	462.33
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	28	473.14	473.14
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	29	483.32	483.32
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	30	495.40	495.40
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	31	508.12	508.12
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	32	519.57	519.57
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	33	531.65	531.65
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	34	544.37	544.37
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	35	557.09	557.09
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	36	569.81	569.81
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	37	582.53	582.53
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	38	589.52	589.52
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	39	596.52	596.52
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	40	620.05	620.05
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	41	644.21	644.21
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	42	669.65	669.65
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	43	695.72	695.72
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	44	723.07	723.07
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	45	751.05	751.05
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	46	780.30	780.30
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	47	810.83	810.83
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	48	842.63	842.63
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	49	875.70	875.70
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	50	910.04	910.04
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	51	945.65	945.65
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	52	982.53	982.53
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	53	1020.69	1020.69
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	54	1060.76	1060.76
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	55	1102.09	1102.09
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	56	1145.34	1145.34
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	57	1189.85	1189.85
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	58	1236.28	1236.28
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	59	1284.61	1284.61
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	60	1334.85	1334.85
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	61	1386.93	1386.93
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	62	1386.93	1386.93
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	63	1386.93	1386.93
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1386.30	1386.30
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	15	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	16	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	17	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	18	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	19	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	20	325.61	325.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	21	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	22	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	23	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	24	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	25	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	26	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	27	361.96	361.96
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	28	370.42	370.42
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	29	378.39	378.39
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	30	387.84	387.84
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	31	397.80	397.80
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	32	406.76	406.76
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	33	416.22	416.22
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	34	426.18	426.18
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	35	436.14	436.14
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	36	446.10	446.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	37	456.05	456.05
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	38	461.53	461.53
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	39	467.01	467.01
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	40	485.43	485.43
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	41	504.35	504.35
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	42	524.26	524.26
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	43	544.68	544.68
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	44	566.08	566.08
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	45	587.99	587.99
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	46	610.89	610.89
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	47	634.79	634.79
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	48	659.68	659.68
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	49	685.57	685.57
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	50	712.46	712.46
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	51	740.34	740.34
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	52	769.22	769.22
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	53	799.09	799.09
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	54	830.46	830.46
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	55	862.82	862.82
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	56	896.67	896.67
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	57	931.52	931.52
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	58	967.87	967.87
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	59	1005.71	1005.71
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	60	1045.04	1045.04
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	61	1085.82	1085.82
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	62	1085.82	1085.82
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	63	1085.82	1085.82
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1085.32	1085.32
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	15	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	16	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	17	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	18	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	19	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	20	317.05	317.05
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	21	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	22	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	23	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	24	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	25	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	26	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	27	352.44	352.44
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	28	360.68	360.68
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	29	368.43	368.43
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	30	377.64	377.64
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	31	387.34	387.34
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	32	396.07	396.07
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	33	405.28	405.28

	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	34	414.97	414.97
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	35	424.67	424.67
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	36	434.36	434.36
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	37	444.06	444.06
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	38	449.39	449.39
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	39	454.72	454.72
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	40	472.66	472.66
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	41	491.08	491.08
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	42	510.47	510.47
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	43	530.35	530.35
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	44	551.20	551.20
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	45	572.53	572.53
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	46	594.83	594.83
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	47	618.10	618.10
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	48	642.33	642.33
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	49	667.54	667.54
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	50	693.72	693.72
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	51	720.87	720.87
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	52	748.99	748.99
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	53	778.07	778.07
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	54	808.61	808.61
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	55	840.13	840.13
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	56	873.09	873.09
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	57	907.03	907.03
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	58	942.41	942.41
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	59	979.26	979.26
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	60	1017.56	1017.56
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	61	1057.26	1057.26
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	62	1057.26	1057.26
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	63	1057.26	1057.26
	77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1056.77	1056.77
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	15	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	16	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	17	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	18	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	19	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	20	252.02	252.02
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	21	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	22	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	23	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	24	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	25	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	26	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	27	280.16	280.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	28	286.71	286.71
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	29	292.87	292.87
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	30	300.19	300.19
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	31	307.90	307.90
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	32	314.84	314.84
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	33	322.16	322.16
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	34	329.87	329.87
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	35	337.57	337.57
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	36	345.28	345.28
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	37	352.99	352.99
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	38	357.23	357

77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	49	530.64	530.64
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	50	551.45	551.45
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	51	573.03	573.03
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	52	595.38	595.38
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	53	618.50	618.50
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	54	642.78	642.78
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	55	667.83	667.83
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	56	694.03	694.03
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	57	721.01	721.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	58	749.14	749.14
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	59	778.42	778.42
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	60	808.87	808.87
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	61	840.43	840.43
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	62	840.43	840.43
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	63	840.43	840.43
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	64 and over	840.04	840.04
77422DC0110010	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	15	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	16	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	17	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	18	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	19	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	20	431.64	431.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	21	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	22	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	23	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	24	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	25	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	26	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	27	479.82	479.82
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	28	491.04	491.04
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	29	501.60	501.60
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	30	514.15	514.15
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	31	527.35	527.35
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	32	539.23	539.23
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	33	551.77	551.77
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	34	564.97	564.97
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	35	578.17	578.17
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	36	591.37	591.37
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	37	604.57	604.57
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	38	611.83	611.83
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	39	619.09	619.09
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	40	643.51	643.51
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	41	668.59	668.59
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	42	694.99	694.99
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	43	722.05	722.05
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	44	750.43	750.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	45	779.47	779.47
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	46	809.83	809.83
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	47	841.51	841.51
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	48	874.51	874.51
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	49	908.83	908.83
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	50	944.47	944.47
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	51	981.43	981.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	52	1019.71	1019.71
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	53	1059.31	1059.31
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	54	1100.89	1100.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	55	1143.79	1143.79
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	56	1188.67	1188.67
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	57	1234.87	1234.87
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	58	1283.05	1283.05
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	59	1333.21	1333.21
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	60	1385.35	1385.35
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	61	1439.41	1439.41
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	62	1439.41	1439.41
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	63	1439.41	1439.41

77422DC0110010 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1438.75	1438.75
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2023 Rates Table Template v12.0		All fields with an asterisk ( *) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.				
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.				
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.				
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.				
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.				
	HIOS Issuer ID*	77422				
	Rate Effective Date*	4/1/2023				
	Rate Expiration Date*	6/30/2023				
	Rating Method*	Age-Based Rates				
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*	
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an individual tobacco enrollee on a plan	
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	15	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	16	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	17	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	18	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	19	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	20	417.39	417.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	21	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	22	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	23	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	24	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	25	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	26	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	27	463.98	463.98
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	28	474.83	474.83
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	29	485.04	485.04
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	30	497.17	497.17
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	31	509.93	509.93
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	32	521.42	521.42
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	33	533.55	533.55
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	34	546.31	546.31
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	35	559.07	559.07
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	36	571.84	571.84
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	37	584.60	584.60
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	38	591.62	591.62
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	39	598.64	598.64
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	40	622.26	622.26
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	41	646.51	646.51
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	42	672.04	672.04
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	43	698.20	698.20
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	44	725.65	725.65
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	45	753.73	753.73
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	46	783.09	783.09
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	47	813.72	813.72
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	48	845.63	845.63
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	49	878.82	878.82
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	50	913.28	913.28
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	51	949.02	949.02
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	52	986.04	986.04
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	53	1024.33	1024.33
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	54	1064.54	1064.54
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	55	1106.02	1106.02
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	56	1149.42	1149.42
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	57	1194.10	1194.10
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	58	1240.69	1240.69
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	59	1289.19	1289.19
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	60	1339.61	1339.61
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	61	1391.88	1391.88
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	62	1391.88	1391.88
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	63	1391.88	1391.88
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1391.24	1391.24
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	15	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	16	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	17	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	18	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	19	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	20	412.18	412.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	21	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	22	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	23	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	24	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	25	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	26	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	27	458.18	458.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	28	468.90	468.90
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	29	478.98	478.98
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	30	490.96	490.96
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	31	503.56	503.56
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	32	514.91	514.91
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	33	526.88	526.88
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	34	539.49	539.49
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	35	552.09	552.09
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	36	564.69	564.69
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	37	577.30	577.30
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	38	584.23	584.23
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	39	591.16	591.16
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	40	614.48	614.48
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	41	638.43	638.43
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	42	663.64	663.64
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	43	689.48	689.48
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	44	716.58	716.58
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	45	744.31	744.31
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	46	773.30	773.30
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	47	803.56	803.56
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	48	835.07	835.07
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	49	867.84	867.84
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	50	901.87	901.87
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	51	937.17	937.17
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	52	973.72	973.72
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	53	1011.53	1011.53
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	54	1051.24	1051.24
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	55	1092.21	1092.21
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	56	1135.06	1135.06
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	57	1179.18	1179.18
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	58	1225.19	1225.19
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	59	1273.08	1273.08
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	60	1322.87	1322.87
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	61	1374.49	1374.49
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	62	1374.49	1374.49
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	63	1374.49	1374.49
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1373.86	1373.86
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	15	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	16	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	17	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	18	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	19	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	20	426.49	426.49
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	21	474.09	474.09
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	22	474.09	474.09
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	23	474.09	474.09
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	24	474.09	474.09

	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	25	474.09	474.09	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	26	474.09	474.09	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	27	474.09	474.09	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	28	485.18	485.18	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	29	495.61	495.61	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	30	508.00	508.00	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	31	521.05	521.05	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	32	532.78	532.78	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	33	545.17	545.17	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	34	558.22	558.22	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	35	571.26	571.26	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	36	584.30	584.30	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	37	597.34	597.34	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	38	604.52	604.52	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	39	611.69	611.69	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	40	635.82	635.82	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	41	660.60	660.60	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	42	686.69	686.69	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	43	713.42	713.42	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	44	741.46	741.46	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	45	770.16	770.16	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	46	800.16	800.16	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	47	831.46	831.46	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	48	864.06	864.06	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	49	897.97	897.97	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	50	933.19	933.19	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	51	969.71	969.71	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	52	1007.53	1007.53	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	53	1046.66	1046.66	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	54	1087.74	1087.74	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	55	1130.13	1130.13	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	56	1174.47	1174.47	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	57	1220.12	1220.12	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	58	1267.73	1267.73	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	59	1317.29	1317.29	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	60	1368.81	1368.81	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	61	1422.22	1422.22	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	62	1422.22	1422.22	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	63	1422.22	1422.22	
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1421.56	1421.56	
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	15	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	16	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	17	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	18	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	19	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	20	333.89	333.89
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	21	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	22	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	23	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	24	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	25	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	26	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	27	371.16	371.16
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	28	379.84	379.84
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	29	388.01	388.01
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	30	397.71	397.71
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	31	407.92	407.92
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	32	417.11	417.11
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	33	426.81	426.81
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	34	437.02	437.02
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	35	447.23	447.23
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	36	457.44	457.44
		77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	37	467.66	467.66
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	38	473.27	473.27	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	39	478.89	478.89	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	40	497.78	497.78	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	41	517.18	517.18	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	42	537.60	537.60	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	43	558.53	558.53	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	44	580.49	580.49	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	45	602.95	602.95	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	46	626.43	626.43	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	47	650.94	650.94	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	48	676.47	676.47	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	49	703.02	703.02	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	50	730.58	730.58	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	51	759.17	759.17	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	52	788.79	788.79	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	53	819.42	819.42	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	54	851.58	851.58	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	55	884.77	884.77	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	56	919.48	919.48	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	57	955.22	955.22	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	58	992.49	992.49	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	59	1031.29	1031.29	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	60	1071.63	1071.63	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	61	1113.44	1113.44	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	62	1113.44	1113.44	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	63	1113.44	1113.44	
77422DC0110006		Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1112.93	1112.93	
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	15	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	16	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	17	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	18	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	19	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	20	325.11	325.11
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	21	361.40	361.40
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	22	361.40	361.40
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	23	361.40	361.40
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	24	361.40	361.40
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	25	361.40	361.40
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	26	361.40	361.40
		77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	27	361.40	361.40
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	28	369.85	369.85	
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	29	377.81	377.81	
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	30	387.25	387.25	
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	31	397.19	397.19	
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	32	406.14	406.14	
	77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	33	415.59	415.59	

77422DC0110007 Rating Area 1	Tobacco User/Non-Tobacco User	34	425.53	425.53	
	Tobacco User/Non-Tobacco User	35	435.47	435.47	
	Tobacco User/Non-Tobacco User	36	445.41	445.41	
	Tobacco User/Non-Tobacco User	37	455.36	455.36	
	Tobacco User/Non-Tobacco User	38	460.82	460.82	
	Tobacco User/Non-Tobacco User	39	466.29	466.29	
	Tobacco User/Non-Tobacco User	40	484.69	484.69	
	Tobacco User/Non-Tobacco User	41	503.58	503.58	
	Tobacco User/Non-Tobacco User	42	523.46	523.46	
	Tobacco User/Non-Tobacco User	43	543.84	543.84	
	Tobacco User/Non-Tobacco User	44	565.22	565.22	
	Tobacco User/Non-Tobacco User	45	587.09	587.09	
	Tobacco User/Non-Tobacco User	46	609.96	609.96	
	Tobacco User/Non-Tobacco User	47	633.82	633.82	
	Tobacco User/Non-Tobacco User	48	658.68	658.68	
	Tobacco User/Non-Tobacco User	49	684.53	684.53	
	Tobacco User/Non-Tobacco User	50	711.37	711.37	
	Tobacco User/Non-Tobacco User	51	739.21	739.21	
	Tobacco User/Non-Tobacco User	52	768.04	768.04	
	Tobacco User/Non-Tobacco User	53	797.87	797.87	
	Tobacco User/Non-Tobacco User	54	829.19	829.19	
	Tobacco User/Non-Tobacco User	55	861.50	861.50	
	Tobacco User/Non-Tobacco User	56	895.30	895.30	
	Tobacco User/Non-Tobacco User	57	930.10	930.10	
	Tobacco User/Non-Tobacco User	58	966.39	966.39	
	Tobacco User/Non-Tobacco User	59	1004.17	1004.17	
	Tobacco User/Non-Tobacco User	60	1043.44	1043.44	
	Tobacco User/Non-Tobacco User	61	1084.16	1084.16	
	Tobacco User/Non-Tobacco User	62	1084.16	1084.16	
	Tobacco User/Non-Tobacco User	63	1084.16	1084.16	
	Tobacco User/Non-Tobacco User	64 and over	1083.66	1083.66	
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	0-14	258.44	258.44
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	15	258.44	258.44
	77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	16	258.44	258.44
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	17	258.44	258.44	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	18	258.44	258.44	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	19	258.44	258.44	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	20	258.44	258.44	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	21	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	22	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	23	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	24	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	25	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	26	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	27	287.28	287.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	28	294.00	294.00	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	29	300.32	300.32	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	30	307.83	307.83	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	31	315.73	315.73	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	32	322.85	322.85	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	33	330.36	330.36	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	34	338.26	338.26	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	35	346.16	346.16	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	36	354.07	354.07	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	37	361.97	361.97	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	38	366.32	366.32	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	39	370.66	370.66	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	40	385.28	385.28	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	41	400.30	400.30	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	42	416.11	416.11	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	43	432.31	432.31	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	44	449.30	449.30	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	45	466.69	466.69	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	46	484.86	484.86	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	47	503.83	503.83	
77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User	48	523.59	523.59	

77422DC0110009 Rating Area 1	Tobacco User/Non-Tobacco User		49	544.14	544.14
	Tobacco User/Non-Tobacco User		50	565.48	565.48
	Tobacco User/Non-Tobacco User		51	587.61	587.61
	Tobacco User/Non-Tobacco User		52	610.53	610.53
	Tobacco User/Non-Tobacco User		53	634.23	634.23
	Tobacco User/Non-Tobacco User		54	659.13	659.13
	Tobacco User/Non-Tobacco User		55	684.82	684.82
	Tobacco User/Non-Tobacco User		56	711.69	711.69
	Tobacco User/Non-Tobacco User		57	739.35	739.35
	Tobacco User/Non-Tobacco User		58	768.19	768.19
	Tobacco User/Non-Tobacco User		59	798.23	798.23
	Tobacco User/Non-Tobacco User		60	829.44	829.44
	Tobacco User/Non-Tobacco User		61	861.81	861.81
	Tobacco User/Non-Tobacco User		62	861.81	861.81
	Tobacco User/Non-Tobacco User		63	861.81	861.81
	Tobacco User/Non-Tobacco User		64 and over	861.41	861.41
77422DC0110010	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	442.63	442.63
77422DC0110010 Rating Area 1	Tobacco User/Non-Tobacco User		15	442.63	442.63
	Tobacco User/Non-Tobacco User		16	442.63	442.63
	Tobacco User/Non-Tobacco User		17	442.63	442.63
	Tobacco User/Non-Tobacco User		18	442.63	442.63
	Tobacco User/Non-Tobacco User		19	442.63	442.63
	Tobacco User/Non-Tobacco User		20	442.63	442.63
	Tobacco User/Non-Tobacco User		21	492.03	492.03
	Tobacco User/Non-Tobacco User		22	492.03	492.03
	Tobacco User/Non-Tobacco User		23	492.03	492.03
	Tobacco User/Non-Tobacco User		24	492.03	492.03
	Tobacco User/Non-Tobacco User		25	492.03	492.03
	Tobacco User/Non-Tobacco User		26	492.03	492.03
	Tobacco User/Non-Tobacco User		27	492.03	492.03
	Tobacco User/Non-Tobacco User		28	503.54	503.54
	Tobacco User/Non-Tobacco User		29	514.37	514.37
	Tobacco User/Non-Tobacco User		30	527.22	527.22
	Tobacco User/Non-Tobacco User		31	540.76	540.76
	Tobacco User/Non-Tobacco User		32	552.94	552.94
	Tobacco User/Non-Tobacco User		33	565.80	565.80
	Tobacco User/Non-Tobacco User		34	579.34	579.34
	Tobacco User/Non-Tobacco User		35	592.87	592.87
	Tobacco User/Non-Tobacco User		36	606.41	606.41
	Tobacco User/Non-Tobacco User		37	619.95	619.95
	Tobacco User/Non-Tobacco User		38	627.39	627.39
	Tobacco User/Non-Tobacco User		39	634.84	634.84
	Tobacco User/Non-Tobacco User		40	659.88	659.88
	Tobacco User/Non-Tobacco User		41	685.60	685.60
	Tobacco User/Non-Tobacco User		42	712.67	712.67
	Tobacco User/Non-Tobacco User		43	740.42	740.42
	Tobacco User/Non-Tobacco User		44	769.52	769.52
	Tobacco User/Non-Tobacco User		45	799.30	799.30
	Tobacco User/Non-Tobacco User		46	830.43	830.43
	Tobacco User/Non-Tobacco User		47	862.92	862.92
	Tobacco User/Non-Tobacco User		48	896.76	896.76
	Tobacco User/Non-Tobacco User		49	931.95	931.95
	Tobacco User/Non-Tobacco User		50	968.50	968.50
	Tobacco User/Non-Tobacco User		51	1006.40	1006.40
	Tobacco User/Non-Tobacco User		52	1045.65	1045.65
	Tobacco User/Non-Tobacco User		53	1086.26	1086.26
	Tobacco User/Non-Tobacco User		54	1128.90	1128.90
	Tobacco User/Non-Tobacco User		55	1172.89	1172.89
	Tobacco User/Non-Tobacco User		56	1218.91	1218.91
	Tobacco User/Non-Tobacco User		57	1266.29	1266.29
	Tobacco User/Non-Tobacco User		58	1315.69	1315.69
	Tobacco User/Non-Tobacco User		59	1367.13	1367.13
	Tobacco User/Non-Tobacco User		60	1420.60	1420.60
	Tobacco User/Non-Tobacco User		61	1476.03	1476.03
	Tobacco User/Non-Tobacco User		62	1476.03	1476.03
	Tobacco User/Non-Tobacco User		63	1476.03	1476.03



77422DC0110010 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1475.35	1475.35
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2023 Rates Table Template v12.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*		77422			
Rate Effective Date*		7/1/2023			
Rate Expiration Date*		9/30/2023			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	15	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	16	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	17	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	18	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	19	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	20	428.01	428.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	21	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	22	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	23	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	24	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	25	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	26	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	27	475.78	475.78
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	28	486.91	486.91
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	29	497.38	497.38
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	30	509.82	509.82
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	31	522.90	522.90
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	32	534.68	534.68
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	33	547.12	547.12
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	34	560.21	560.21
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	35	573.30	573.30
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	36	586.39	586.39
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	37	599.48	599.48
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	38	606.67	606.67
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	39	613.87	613.87
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	40	638.09	638.09
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	41	662.96	662.96
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	42	689.14	689.14
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	43	715.97	715.97
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	44	744.11	744.11
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	45	772.90	772.90
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	46	803.01	803.01
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	47	834.42	834.42
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	48	867.15	867.15
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	49	901.18	901.18
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	50	936.52	936.52
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	51	973.17	973.17
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	52	1011.12	1011.12
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	53	1050.39	1050.39
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	54	1091.62	1091.62
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	55	1134.16	1134.16
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	56	1178.66	1178.66
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	57	1224.47	1224.47
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	58	1272.25	1272.25
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	59	1321.99	1321.99
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	60	1373.69	1373.69
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	61	1427.29	1427.29
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	62	1427.29	1427.29
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	63	1427.29	1427.29
77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1426.63	1426.63
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	15	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	16	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	17	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	18	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	19	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	20	422.66	422.66
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	21	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	22	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	23	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	24	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	25	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	26	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	27	469.84	469.84
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	28	480.83	480.83
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	29	491.17	491.17
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	30	503.45	503.45
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	31	516.37	516.37
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	32	528.01	528.01
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	33	540.28	540.28
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	34	553.21	553.21
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	35	566.14	566.14
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	36	579.06	579.06
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	37	591.99	591.99
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	38	599.10	599.10
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	39	606.20	606.20
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	40	630.12	630.12
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	41	654.68	654.68
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	42	680.53	680.53
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	43	707.02	707.02
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	44	734.81	734.81
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	45	763.25	763.25
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	46	792.98	792.98
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	47	824.00	824.00
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	48	856.31	856.31
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	49	889.92	889.92
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	50	924.82	924.82
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	51	961.01	961.01
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	52	998.49	998.49
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	53	1037.27	1037.27
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	54	1077.98	1077.98
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	55	1119.99	1119.99
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	56	1163.94	1163.94
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	57	1209.18	1209.18
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	58	1256.36	1256.36
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	59	1305.47	1305.47
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	60	1356.53	1356.53
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	61	1409.46	1409.46
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	62	1409.46	1409.46
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	63	1409.46	1409.46
77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1408.81	1408.81
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	15	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	16	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	17	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	18	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	19	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	20	437.34	437.34
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	21	486.15	486.15
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	22	486.15	486.15
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	23	486.15	486.15
77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	24	486.15	486.15

77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	25	486.15	486.15
	Rating Area 1	Tobacco User/Non-Tobacco User	26	486.15	486.15
	Rating Area 1	Tobacco User/Non-Tobacco User	27	486.15	486.15
	Rating Area 1	Tobacco User/Non-Tobacco User	28	497.52	497.52
	Rating Area 1	Tobacco User/Non-Tobacco User	29	508.22	508.22
	Rating Area 1	Tobacco User/Non-Tobacco User	30	520.93	520.93
	Rating Area 1	Tobacco User/Non-Tobacco User	31	534.30	534.30
	Rating Area 1	Tobacco User/Non-Tobacco User	32	546.34	546.34
	Rating Area 1	Tobacco User/Non-Tobacco User	33	559.04	559.04
	Rating Area 1	Tobacco User/Non-Tobacco User	34	572.42	572.42
	Rating Area 1	Tobacco User/Non-Tobacco User	35	585.79	585.79
	Rating Area 1	Tobacco User/Non-Tobacco User	36	599.17	599.17
	Rating Area 1	Tobacco User/Non-Tobacco User	37	612.54	612.54
	Rating Area 1	Tobacco User/Non-Tobacco User	38	619.90	619.90
	Rating Area 1	Tobacco User/Non-Tobacco User	39	627.25	627.25
	Rating Area 1	Tobacco User/Non-Tobacco User	40	652.00	652.00
	Rating Area 1	Tobacco User/Non-Tobacco User	41	677.41	677.41
	Rating Area 1	Tobacco User/Non-Tobacco User	42	704.16	704.16
	Rating Area 1	Tobacco User/Non-Tobacco User	43	731.57	731.57
	Rating Area 1	Tobacco User/Non-Tobacco User	44	760.33	760.33
	Rating Area 1	Tobacco User/Non-Tobacco User	45	789.75	789.75
	Rating Area 1	Tobacco User/Non-Tobacco User	46	820.51	820.51
	Rating Area 1	Tobacco User/Non-Tobacco User	47	852.61	852.61
	Rating Area 1	Tobacco User/Non-Tobacco User	48	886.05	886.05
	Rating Area 1	Tobacco User/Non-Tobacco User	49	920.82	920.82
	Rating Area 1	Tobacco User/Non-Tobacco User	50	956.93	956.93
	Rating Area 1	Tobacco User/Non-Tobacco User	51	994.38	994.38
	Rating Area 1	Tobacco User/Non-Tobacco User	52	1033.16	1033.16
	Rating Area 1	Tobacco User/Non-Tobacco User	53	1073.29	1073.29
	Rating Area 1	Tobacco User/Non-Tobacco User	54	1115.41	1115.41
Rating Area 1	Tobacco User/Non-Tobacco User	55	1158.88	1158.88	
Rating Area 1	Tobacco User/Non-Tobacco User	56	1204.35	1204.35	
Rating Area 1	Tobacco User/Non-Tobacco User	57	1251.16	1251.16	
Rating Area 1	Tobacco User/Non-Tobacco User	58	1299.98	1299.98	
Rating Area 1	Tobacco User/Non-Tobacco User	59	1350.80	1350.80	
Rating Area 1	Tobacco User/Non-Tobacco User	60	1403.63	1403.63	
Rating Area 1	Tobacco User/Non-Tobacco User	61	1458.40	1458.40	
Rating Area 1	Tobacco User/Non-Tobacco User	62	1458.40	1458.40	
Rating Area 1	Tobacco User/Non-Tobacco User	63	1458.40	1458.40	
Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1457.73	1457.73	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	15	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	16	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	17	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	18	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	19	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	20	342.39	342.39
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	21	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	22	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	23	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	24	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	25	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	26	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	27	380.61	380.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	28	389.51	389.51
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	29	397.88	397.88
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	30	407.83	407.83
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	31	418.30	418.30
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	32	427.72	427.72
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	33	437.67	437.67
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	34	448.14	448.14
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	35	458.61	458.61
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	36	469.08	469.08
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	37	479.55	479.55
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	38	485.31	485.31
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	39	491.07	491.07
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	40	510.44	510.44
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	41	530.34	530.34
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	42	551.28	551.28
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	43	572.74	572.74
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	44	595.25	595.25
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	45	618.29	618.29
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	46	642.37	642.37
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	47	667.50	667.50
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	48	693.68	693.68
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	49	720.90	720.90
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	50	749.17	749.17
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	51	778.49	778.49
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	52	808.85	808.85
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	53	840.27	840.27
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	54	873.25	873.25
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	55	907.28	907.28
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	56	942.88	942.88
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	57	979.52	979.52
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	58	1017.74	1017.74
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	59	1057.53	1057.53
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	60	1098.89	1098.89
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	61	1141.77	1141.77
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	62	1141.77	1141.77
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	63	1141.77	1141.77
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1141.24	1141.24
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	15	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	16	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	17	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	18	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	19	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	20	333.38	333.38
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	21	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	22	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	23	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	24	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	25	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	26	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	27	370.60	370.60
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	28	379.26	379.26
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	29	387.42	387.42
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	30	397.10	397.10
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	31	407.30	407.30
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	32	416.47	416.47
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	33	426.16	426.16

77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	34	436.36	436.36
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	35	446.55	446.55
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	36	456.75	456.75
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	37	466.94	466.94
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	38	472.55	472.55
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	39	478.16	478.16
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	40	497.02	497.02
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	41	516.39	516.39
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	42	536.78	536.78
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	43	557.68	557.68
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	44	579.60	579.60
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	45	602.03	602.03
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	46	625.48	625.48
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	47	649.94	649.94
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	48	675.43	675.43
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	49	701.94	701.94
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	50	729.47	729.47
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	51	758.01	758.01
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	52	787.58	787.58
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	53	818.17	818.17
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	54	850.28	850.28
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	55	883.42	883.42
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	56	918.08	918.08
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	57	953.76	953.76
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	58	990.97	990.97
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	59	1029.72	1029.72
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	60	1069.99	1069.99
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	61	1111.74	1111.74
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	62	1111.74	1111.74
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	63	1111.74	1111.74
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	64 and over	1111.23	1111.23
77422DC0110009	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	15	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	16	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	17	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	18	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	19	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	20	265.01	265.01
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	21	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	22	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	23	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	24	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	25	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	26	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	27	294.59	294.59
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	28	301.48	301.48
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	29	307.96	307.96
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	30	315.66	315.66
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	31	323.77	323.77
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	32	331.06	331.06
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	33	338.76	338.76
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	34	346.86	346.86
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	35	354.97	354.97
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	36	363.07	363.07
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	37	371.18	371.18
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	38	375.63	375.63
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	39	380.09	380.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	40	395.08	395.08
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	41	410.48	410.48
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	42	426.69	426.69
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	43	443.31	443.31
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	44	460.73	460.73
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	45	478.56	478.56
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	46	497.20	497.20
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	47	516.65	516.65
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	48	536.91	536.91

77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	49	557.98	557.98
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	50	579.86	579.86
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	51	602.55	602.55
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	52	626.06	626.06
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	53	650.37	650.37
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	54	675.90	675.90
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	55	702.24	702.24
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	56	729.79	729.79
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	57	758.16	758.16
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	58	787.74	787.74
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	59	818.53	818.53
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	60	850.55	850.55
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	61	883.73	883.73
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	62	883.73	883.73
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	63	883.73	883.73
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	64 and over	883.33	883.33
77422DC0110010	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	15	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	16	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	17	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	18	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	19	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	20	453.89	453.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	21	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	22	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	23	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	24	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	25	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	26	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	27	504.55	504.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	28	516.35	516.35
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	29	527.45	527.45
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	30	540.64	540.64
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	31	554.52	554.52
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	32	567.01	567.01
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	33	580.20	580.20
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	34	594.08	594.08
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	35	607.96	607.96
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	36	621.84	621.84
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	37	635.72	635.72
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	38	643.35	643.35
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	39	650.99	650.99
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	40	676.67	676.67
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	41	703.04	703.04
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	42	730.80	730.80
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	43	759.25	759.25
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	44	789.10	789.10
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	45	819.63	819.63
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	46	851.56	851.56
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	47	884.87	884.87
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	48	919.57	919.57
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	49	955.66	955.66
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	50	993.14	993.14
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	51	1032.00	1032.00
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	52	1072.25	1072.25
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	53	1113.89	1113.89
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	54	1157.62	1157.62
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	55	1202.73	1202.73
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	56	1249.92	1249.92
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	57	1298.50	1298.50
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	58	1349.17	1349.17
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	59	1401.91	1401.91
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	60	1456.74	1456.74
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	61	1513.58	1513.58
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	62	1513.58	1513.58
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	63	1513.58	1513.58

77422DC0110010 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1512.88	1512.88
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2023 Rates Table Template v12.0		All fields with an asterisk ( *) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.				
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.				
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.				
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.				
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.				
	HIOS Issuer ID*	77422				
	Rate Effective Date*	10/1/2023				
	Rate Expiration Date*	12/31/2023				
	Rating Method*	Age-Based Rates				
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*	
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an individual tobacco enrollee on a plan	
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	15	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	16	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	17	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	18	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	19	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	20	438.90	438.90
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	21	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	22	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	23	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	24	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	25	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	26	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	27	487.89	487.89
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	28	499.30	499.30
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	29	510.03	510.03
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	30	522.79	522.79
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	31	536.21	536.21
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	32	548.29	548.29
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	33	561.04	561.04
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	34	574.46	574.46
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	35	587.88	587.88
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	36	601.30	601.30
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	37	614.73	614.73
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	38	622.11	622.11
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	39	629.49	629.49
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	40	654.32	654.32
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	41	679.82	679.82
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	42	706.67	706.67
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	43	734.18	734.18
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	44	763.04	763.04
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	45	792.57	792.57
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	46	823.44	823.44
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	47	855.65	855.65
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	48	889.21	889.21
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	49	924.10	924.10
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	50	960.34	960.34
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	51	997.92	997.92
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	52	1036.85	1036.85
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	53	1077.11	1077.11
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	54	1119.39	1119.39
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	55	1163.01	1163.01
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	56	1208.65	1208.65
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	57	1255.63	1255.63
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	58	1304.62	1304.62
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	59	1355.62	1355.62
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	60	1408.64	1408.64
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	61	1463.60	1463.60
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	62	1463.60	1463.60
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	63	1463.60	1463.60
	77422DC0110002	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1462.93	1462.93
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	15	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	16	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	17	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	18	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	19	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	20	433.42	433.42
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	21	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	22	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	23	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	24	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	25	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	26	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	27	481.79	481.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	28	493.06	493.06
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	29	503.66	503.66
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	30	516.25	516.25
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	31	529.51	529.51
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	32	541.44	541.44
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	33	554.03	554.03
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	34	567.28	567.28
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	35	580.54	580.54
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	36	593.79	593.79
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	37	607.05	607.05
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	38	614.34	614.34
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	39	621.63	621.63
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	40	646.15	646.15
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	41	671.33	671.33
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	42	697.84	697.84
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	43	725.01	725.01
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	44	753.51	753.51
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	45	782.67	782.67
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	46	813.15	813.15
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	47	844.96	844.96
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	48	878.10	878.10
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	49	912.56	912.56
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	50	948.35	948.35
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	51	985.46	985.46
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	52	1023.89	1023.89
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	53	1063.66	1063.66
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	54	1105.41	1105.41
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	55	1148.48	1148.48
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	56	1193.55	1193.55
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	57	1239.94	1239.94
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	58	1288.32	1288.32
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	59	1338.68	1338.68
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	60	1391.04	1391.04
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	61	1445.32	1445.32
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	62	1445.32	1445.32
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	63	1445.32	1445.32
	77422DC0110003	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1444.65	1444.65
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	15	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	16	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	17	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	18	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	19	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	20	448.46	448.46
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	21	498.52	498.52
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	22	498.52	498.52
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	23	498.52	498.52
	77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	24	498.52	498.52



77422DC0110005	Rating Area 1	Tobacco User/Non-Tobacco User	25	498.52	498.52	
	Rating Area 1	Tobacco User/Non-Tobacco User	26	498.52	498.52	
	Rating Area 1	Tobacco User/Non-Tobacco User	27	498.52	498.52	
	Rating Area 1	Tobacco User/Non-Tobacco User	28	510.18	510.18	
	Rating Area 1	Tobacco User/Non-Tobacco User	29	521.15	521.15	
	Rating Area 1	Tobacco User/Non-Tobacco User	30	534.18	534.18	
	Rating Area 1	Tobacco User/Non-Tobacco User	31	547.89	547.89	
	Rating Area 1	Tobacco User/Non-Tobacco User	32	560.24	560.24	
	Rating Area 1	Tobacco User/Non-Tobacco User	33	573.27	573.27	
	Rating Area 1	Tobacco User/Non-Tobacco User	34	586.98	586.98	
	Rating Area 1	Tobacco User/Non-Tobacco User	35	600.70	600.70	
	Rating Area 1	Tobacco User/Non-Tobacco User	36	614.41	614.41	
	Rating Area 1	Tobacco User/Non-Tobacco User	37	628.12	628.12	
	Rating Area 1	Tobacco User/Non-Tobacco User	38	635.67	635.67	
	Rating Area 1	Tobacco User/Non-Tobacco User	39	643.21	643.21	
	Rating Area 1	Tobacco User/Non-Tobacco User	40	668.58	668.58	
	Rating Area 1	Tobacco User/Non-Tobacco User	41	694.64	694.64	
	Rating Area 1	Tobacco User/Non-Tobacco User	42	722.07	722.07	
	Rating Area 1	Tobacco User/Non-Tobacco User	43	750.18	750.18	
	Rating Area 1	Tobacco User/Non-Tobacco User	44	779.67	779.67	
	Rating Area 1	Tobacco User/Non-Tobacco User	45	809.84	809.84	
	Rating Area 1	Tobacco User/Non-Tobacco User	46	841.39	841.39	
	Rating Area 1	Tobacco User/Non-Tobacco User	47	874.30	874.30	
	Rating Area 1	Tobacco User/Non-Tobacco User	48	908.59	908.59	
	Rating Area 1	Tobacco User/Non-Tobacco User	49	944.24	944.24	
	Rating Area 1	Tobacco User/Non-Tobacco User	50	981.27	981.27	
	Rating Area 1	Tobacco User/Non-Tobacco User	51	1019.67	1019.67	
	Rating Area 1	Tobacco User/Non-Tobacco User	52	1059.45	1059.45	
	Rating Area 1	Tobacco User/Non-Tobacco User	53	1100.59	1100.59	
	Rating Area 1	Tobacco User/Non-Tobacco User	54	1143.79	1143.79	
	Rating Area 1	Tobacco User/Non-Tobacco User	55	1188.36	1188.36	
	Rating Area 1	Tobacco User/Non-Tobacco User	56	1234.99	1234.99	
	Rating Area 1	Tobacco User/Non-Tobacco User	57	1282.99	1282.99	
	Rating Area 1	Tobacco User/Non-Tobacco User	58	1333.05	1333.05	
	Rating Area 1	Tobacco User/Non-Tobacco User	59	1385.17	1385.17	
	Rating Area 1	Tobacco User/Non-Tobacco User	60	1439.34	1439.34	
	Rating Area 1	Tobacco User/Non-Tobacco User	61	1495.50	1495.50	
	Rating Area 1	Tobacco User/Non-Tobacco User	62	1495.50	1495.50	
	Rating Area 1	Tobacco User/Non-Tobacco User	63	1495.50	1495.50	
	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1494.81	1494.81	
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	15	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	16	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	17	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	18	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	19	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	20	351.10	351.10
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	21	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	22	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	23	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	24	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	25	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	26	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	27	390.29	390.29
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	28	399.42	399.42
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	29	408.00	408.00
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	30	418.20	418.20
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	31	428.94	428.94
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	32	438.61	438.61
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	33	448.81	448.81
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	34	459.54	459.54
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	35	470.28	470.28
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	36	481.02	481.02
	77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	37	491.75	491.75
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	38	497.66	497.66	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	39	503.56	503.56	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	40	523.43	523.43	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	41	543.83	543.83	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	42	565.30	565.30	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	43	587.31	587.31	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	44	610.40	610.40	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	45	634.02	634.02	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	46	658.71	658.71	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	47	684.48	684.48	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	48	711.32	711.32	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	49	739.24	739.24	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	50	768.23	768.23	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	51	798.29	798.29	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	52	829.43	829.43	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	53	861.64	861.64	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	54	895.46	895.46	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	55	930.36	930.36	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	56	966.86	966.86	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	57	1004.44	1004.44	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	58	1043.63	1043.63	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	59	1084.43	1084.43	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	60	1126.84	1126.84	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	61	1170.81	1170.81	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	62	1170.81	1170.81	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	63	1170.81	1170.81	
77422DC0110006	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1170.28	1170.28	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	15	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	16	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	17	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	18	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	19	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	20	341.86	341.86	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	21	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	22	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	23	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	24	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	25	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	26	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	27	380.02	380.02	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	28	388.91	388.91	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	29	397.27	397.27	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	30	407.21	407.21	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	31	417.66	417.66	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	32	427.07	427.07	
77422DC0110007	Rating Area 1	Tobacco User/Non-Tobacco User	33	437.00	437.00	



77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	34	447.46	447.46
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	35	457.91	457.91
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	36	468.37	468.37
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	37	478.82	478.82
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	38	484.57	484.57
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	39	490.32	490.32
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	40	509.66	509.66
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	41	529.52	529.52
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	42	550.43	550.43
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	43	571.87	571.87
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	44	594.34	594.34
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	45	617.34	617.34
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	46	641.39	641.39
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	47	666.48	666.48
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	48	692.62	692.62
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	49	719.80	719.80
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	50	748.03	748.03
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	51	777.30	777.30
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	52	807.62	807.62
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	53	838.98	838.98
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	54	871.91	871.91
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	55	905.89	905.89
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	56	941.44	941.44
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	57	978.03	978.03
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	58	1016.19	1016.19
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	59	1055.91	1055.91
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	60	1097.21	1097.21
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	61	1140.02	1140.02
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	62	1140.02	1140.02
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	63	1140.02	1140.02
77422DC0110007 Rating Area 1			Tobacco User/Non-Tobacco User	64 and over	1139.50	1139.50
77422DC0110009	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	15	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	16	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	17	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	18	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	19	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	20	271.75	271.75
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	21	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	22	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	23	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	24	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	25	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	26	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	27	302.09	302.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	28	309.15	309.15
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	29	315.80	315.80
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	30	323.69	323.69
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	31	332.00	332.00
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	32	339.48	339.48
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	33	347.38	347.38
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	34	355.69	355.69
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	35	364.00	364.00
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	36	372.31	372.31
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	37	380.62	380.62
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	38	385.19	385.19
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	39	389.76	389.76
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	40	405.14	405.14
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	41	420.93	420.93
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	42	437.55	437.55
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	43	454.58	454.58
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	44	472.45	472.45
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	45	490.73	490.73
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	46	509.85	509.85
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	47	529.79	529.79
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	48	550.57	550.57

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77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	50	594.61	594.61
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	51	617.88	617.88
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	52	641.98	641.98
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	53	666.92	666.92
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	54	693.09	693.09
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	55	720.10	720.10
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	56	748.36	748.36
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	57	777.45	777.45
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	58	807.78	807.78
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	59	839.36	839.36
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	60	872.18	872.18
77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	61	906.22	906.22
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77422DC0110009 Rating Area 1			Tobacco User/Non-Tobacco User	63	906.22	906.22
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	16	465.43	465.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	17	465.43	465.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	18	465.43	465.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	19	465.43	465.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	20	465.43	465.43
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	21	517.38	517.38
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	24	517.38	517.38
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	25	517.38	517.38
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	26	517.38	517.38
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	27	517.38	517.38
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	28	529.48	529.48
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	30	554.39	554.39
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	36	637.66	637.66
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	39	667.55	667.55
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	40	693.88	693.88
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	41	720.92	720.92
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	42	749.39	749.39
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	43	778.57	778.57
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	44	809.17	809.17
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	45	840.48	840.48
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	47	907.38	907.38
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	48	942.96	942.96
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	49	979.97	979.97
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77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	51	1058.26	1058.26
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	52	1099.53	1099.53
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	53	1142.23	1142.23
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	54	1187.07	1187.07
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	55	1233.33	1233.33
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	56	1281.72	1281.72
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	57	1331.54	1331.54
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	58	1383.49	1383.49
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	59	1437.58	1437.58
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	60	1493.80	1493.80
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	61	1552.08	1552.08
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	62	1552.08	1552.08
77422DC0110010 Rating Area 1			Tobacco User/Non-Tobacco User	63	1552.08	1552.08

77422DC0110010 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1551.37	1551.37
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<b>SERFF Tracking #:</b>	AETN-133247387	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	DCALICSG2023
<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company		
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO				
<b>Product Name:</b>	2023 DC ALIC PPO SG				
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC				

## URRT

### State Determination

<b>Review Status:</b>	Incomplete
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<b>SERFF Tracking #:</b>	AETN-133247387	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	DCALICSG2023
<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company		
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO				
<b>Product Name:</b>	2023 DC ALIC PPO SG				
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC				

## URRT Items

Item Name	Attachment(s)
Unified Rate Review Template	<i>UnifiedRateReviewSubmission_20220430214656.xml</i>
Actuarial Memorandum	<i>DC_SG_77422_URRT_Part_III_Memo_and_Cert_ALIC_2023.pdf</i>
Actuarial Memorandum - Redacted	<i>DC_SG_77422_URRT_Part_III_Memo_and_Cert_ALIC_2023_redacted.pdf</i>

<b>SERFF Tracking #:</b>	AETN-133247387	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	DCALICSG2023
<hr/>					
<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company		
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO				
<b>Product Name:</b>	2023 DC ALIC PPO SG				
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC				

***Attachment UnifiedRateReviewSubmission\_20220430214656.xml is not a PDF document and cannot be reproduced here.***

## Actuarial Memorandum and Certification

### General Information

#### *Company Identifying Information:*

**Company Legal Name:** Aetna Life Insurance Company  
**State:** District of Columbia  
**HIOS Issuer ID:** 77422  
**Market:** Small Group  
**Effective Date:** 01/01/2023  
**Rate Filing Tracking Number:** AETN-133232233  
**Policy Form(s):**  
**Form Filing Tracking Number:** AETN-132731328

#### *Company Contact Information:*

**Name:** Joanna Kluza  
**Telephone Number:** 860-273-0099  
**Email Address:** KluzaJ@aetna.com

### 1. Purpose, Scope, and Effective Date

The purpose of this filing is to:

- 1) Provide support for the development of the Part I Unified Rate Review Template;
- 2) Provide support for the assumptions and premiums rate development for the products supported by the policy forms referenced above;
- 3) Request approval of the proposed monthly premium rates; and
- 4) Provide benefit plan designs summaries for the products included in this filing.

The development of the rates reflects the impact of the market forces and rating requirements associated with the Patient Protection and Affordable Care Act (PPACA) and subsequent regulation.

These rates are for plans issued in District of Columbia beginning January 1, 2023. The rates comply with all rating guidelines under federal and state regulations. The filing covers plans that will be offered outside the public Marketplace in District of Columbia.

### 2. Proposed Rate Increase

Monthly premium rates for Small Group Market products in District of Columbia are being revised for effective dates January 1, 2023 through December 31, 2023.

#### A. Reason for Rate Increase(s):

- Impact of medical claim trend (including changes in provider unit costs and increased utilization of medical cost services) and pharmacy trend;
- Revisions to our assumptions about market-wide population morbidity and the projected population distribution;
- Revisions to administrative expense projections;
- Modifications in cost sharing to ensure that plans comply with Actuarial Value requirements;
- Updates to our pricing models used to determine the impact of cost sharing designs;
- Changes in provider networks and contracts.

- Expected claim cost increase of 4.8% due to COVID-19 testing and vaccinations.

B. Variation in Rate Changes by Plan/Product:

Rate changes differ by plan for the following reasons:

- Provider cost estimates have been updated, and the change differs by network.
- Modification to cost sharing differs by plan in order to maintain compliance with Actuarial Value and other regulatory requirements.
- Our internal pricing models have been updated to reflect more current information on levels of induced demand associated with different benefit designs. These changes impact our estimates of the relative costs of the plan designs that will be offered.

Exhibit 1 shows the average threshold increases for products covered by this filing.

3. Experience Period Premium and Claims

A. Paid Through Date:

The experience data reported in Worksheet 1, Section I of the Part I Unified Rate Review Template reflects incurred claims from January 1, 2021 through December 31, 2021 and paid through March 31, 2022.

B. Current Date: The current enrollment and premium is reported as of March 31, 2022.

C. Premiums (Net of MLR Rebate) in Experience Period:

Experience period premiums are date-of-service premiums from our actuarial experience databases for non-grandfathered Small Group business in District of Columbia. Our internal projections indicate that no MLR rebate is expected to be paid in 2022 (for 2021 experience) for the Small Group MLR Pool in District of Columbia. As such, no adjustment was made to premiums to account for expected rebates.

D. Allowed and Incurred Claims Incurred During the Experience Period:

Allowed and incurred claims are sourced from our actuarial experience databases. These databases provide member-level detail on total allowed and incurred claims but do not include unit cost or utilization metrics. We allocate claims to cost categories and estimate the corresponding unit costs and utilization metrics by using an alternate reporting system that calculates unit cost and utilization metrics by medical cost category but only permits inclusion/exclusion of experience at the market and segment levels. A reconciliation of aggregate data in our actuarial experience databases is performed to ensure that data is consistent with the experience data contained in our enterprise-wide data warehouse.

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

As noted above, the experience period reflects three months of paid claim run-off. The IBNR reserves account for approximately 1.6% of the experience period incurred claims.



In addition to the fee-for-service and capitation payments discussed above, some of our provider contracts include provisions under which we share claim cost differences with the provider relative to a pre-determined target amount. These adjustments serve to increase our claims cost when results are favorable to the target and decrease our claims costs when results are unfavorable. We adjust both allowed and incurred claims by our current estimate of the impact of provider risk sharing provisions.

Aetna recognizes that COVID-19 has had an impact on the level of allowed and incurred claims in the experience period of January 1, 2021 through December 31, 2021. We have internally developed factors to adjust 2021 experience, using calendar year 2019 experience as our baseline claims data. These factors were developed using experience paid-thru January 31, 2022.

#### 4. Benefit Categories

Our internal systems assign claims to several benefit categories. We have mapped these categories to the categories described in the Unified Rate Review Instructions released in April 2022. Inpatient Hospital consists of care delivered at an inpatient facility and associated expenses, including day-based mental health services. Outpatient Hospital includes outpatient surgical, outpatient mental health, and emergency care and associated expenses. Professional includes both specialty physician and primary care physician expenses, including office-based mental health services. Other includes dental, home health care, medical pharmacy expenses, laboratory expenses, and radiology expenses. Non-capitated ambulance is included in the Outpatient Hospital category when billed by the facility and included in Specialist Physician otherwise. Prescription Drug includes drugs dispensed by a pharmacy.

The utilization for these services are counted by service type, and aggregated for each benefit category. Inpatient Hospital utilization is counted as days; Outpatient Hospital, Professional, and Other Medical utilization are counted as visits. Prescription Drug utilization is counted per script.

#### 5. Projection Factors

##### A. Changes in the Morbidity of the Population Insured:

The experience period data includes experience for community-rated policies issued to small employers in 2021.

We also considered the expected morbidity of the DC small group ACA population and the likely population that will be covered by Small Group Single Risk Pool policies in 2023 and have adjusted our projections for this morbidity change accordingly.

##### B. Plan Design Changes:

The products included in this filing include benefits necessary to comply with the Essential Health Benefit requirements. The experience data includes experience for Single Risk Pool products that have essentially identical benefits and coverage issued outside the Single Risk Pool which does not cover all EHBs. The projection factor reflects the pro-rated impact of these additional benefits, as well as any changes in 2023 State Benchmark EHBs, and newly mandated benefits.

The change in projected utilization due to changes in benefits is also considered. As cost sharing decreases (measured by increasing Actuarial Value), utilization increases. This pattern is reflected in the factors that are built into the federal risk adjustment mechanism that started in 2014. The federal risk adjustment program factors and other proprietary models were considered in the development of the utilization change. The average cost sharing in the experience period was compared with the average cost sharing in the projection period. From the average cost sharing change, an expected utilization change was derived.

C. Changes in Demographics:

Experience data was normalized for projected changes in the age/gender mix and area mix using internally-developed factors. Exhibits 2 and 3 contain detail on the calculations of the impact of demographic mix shifts.

D. Other Adjustments:

The 'Other' adjustment includes the projected impact of changes in network composition and provider contracts, expected morbidity changes, changes in benefits, and changes in demographics.

E. Trend Factors (Cost/Utilization):

Medical trend factors are based on our Medical Economics Unit's national guidance coupled with local trend and network experience, based on analysis of a continuous normalized population, excluding catastrophic claims. Allowed medical trend includes known and anticipated changes in provider contract rates, severity and medical technology impacts, and expected changes in utilization. The impact of benefit leveraging is accounted for separately in the projected paid to allowed ratio.

Pharmacy trends are based on national commercial group Rx trend analysis. Pharmacy trend considers the impact of formulary changes, patent expirations, new drugs, other general market share shifts, and overall utilization trend. Pharmacy Trend is expressed in terms of allowed trend less rebates.

Year 1 and Year 2 trends on Worksheet 1 specify annual trends, with 12 months of trend applied to each year.

Exhibit 8 shows the anticipated annual trend from the experience period to the rating period.

6. Manual Rate Adjustments:

A. Source and Appropriateness of Experience Data Used:

The source data for our manual rate is the experience incurred from January 1, 2020 to December 31, 2021 and paid through March 2022 for issuers 12028 and 86443 in the Virginia Small Group HMO & PPO market. The Small Group market experience is considered an appropriate source for the manual rate due to similarities in covered benefits and market dynamics to the current ACA Small Group market. The similar dynamics include: no individual medical underwriting and rating by gender, limits on age-rating, and caps for rating on the number of dependents, as well as plans benefits and cost-sharing.

B. Adjustments Made to the Data:

The Small Group experience used as the basis for the manual rate was adjusted in a similar manner as the base period experience for changes in population risk morbidity, benefits, and demographic and area normalizations. The data is further adjusted for projected changes in network, provider contract rates, and claims adjudication, in addition to unit cost and utilization trend.

C. Inclusion of Capitation Payments:

No services provided in 2023 will be covered by capitation arrangements. We have adjusted the experience data to incorporate our best-estimate of the impact of moving to fee for service payment approaches.

7. Credibility of Experience

The CMS Medicare full credibility standard is 24,000 member months. Based on our experience, the Medicare population has significantly higher utilization than Commercial populations. Using actuarial judgement, we have assigned 20% credibility to the base experience data and 80% to the manual experience.

## 8. Risk Adjustment

### A. Risk Adjustment – Experience Period

Risk Adjustment transfer is accrued at the issuer and market level based on 2021 CMS Interim report. The transfer is allocated to the member-level based by applying the HHS risk transfer calculation to each member relative to the imputed market-average, such that members with higher resulting relative transfers scores may have a receivable and members with lower resulting scores may have a payable, regardless of the net market risk transfer result. The resulting member transfers are summed to the HIOS plan level.

### B. Risk Adjustment – Projection Period

Due to the small size of the block, the volatility in the risk adjuster has increased. After reviewing the historic relationship between the entity-specific risk to the market as well the latest view in the 2021 CMS interim report, the 2023 risk adjuster was developed. The risk profile was inputted into the transfer formula to develop our prospective risk adjustment transfer amount.

In addition, the projected risk adjustment transfer includes changes that were outlined in the 2023 Notice of Benefit and Payment Parameters. The 2023 projected market average premium used in the payment transfer formula is also reduced by 14% to remove administrative cost.

As a result, we project a risk adjustment receivable, net of the 2023 user fee of \$0.22 PBMPM. The resulting PMPM adjustment, net of risk adjustment user fees, is \$127.74.

## 9. Non-Benefit Expenses and Profit & Risk

The retention portion of the projected premium is illustrated in Exhibit 5.

The prospective general and administrative expenses are set to achieve the 80% MLR threshold requirement. Actual general and administrative expenses are based on historical corporate Small Group market expense levels, 2022 projections, and projected changes in expenses, inflation, and membership for 2023 for our National book of Small Group business.

A flat commission per policy per month will be paid to all brokers in DC during open enrollment. Commissions do not vary by plan.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax and State Premium taxes. State premium taxes are estimated on most current known levels and include any known assessments.

The profit and risk load is consistent with the pricing of our 2022 plans.

## 10. Projected Loss Ratio

The expected 2023 MLR for this filing, as defined by PPACA and before any credibility adjustment, is shown in Exhibit 6.

## 11. Single Risk Pool

The plans and rates included in the Part I URRT are those for all plans we intend to offer in the Small Group market in the District of Columbia through Aetna Life Insurance Company. The proposed rates comply with the Single Risk Pool requirements of 45 CFR §156.80(d).

## 12. Index Rate

The index rates for the experience and projection periods are set equal to the actual and projected allowed claims, respectively, less non-essential health benefits.

The index rate reflects the projected mix of business by plan. The AV pricing values for each plan are based on our internal company modeling of plan cost-sharing designs, the plan's provider network, delivery system characteristics, and utilization management practices, the impacts (as applicable) of benefits in addition to EHBs catastrophic eligibility criteria, and the distribution and administrative costs applicable to the plan/product. Rates do not differ for any characteristic other than those allowable under the regulations as described in 45 CFR 156 §156.80(d)(2).

**Small Group Market Trend Adjustments:** Exhibit 7 illustrates the quarterly trend factors, the resulting index rate for effective dates during each calendar quarter, the projected membership distribution by effective date, and the weighted-average index rate. Trend factors are developed from annual forward trend and leveraging. A trend factor of 1.00 corresponds to a policy period that begins January 1, 2023.

### 13. Market-Adjusted Index Rate

Worksheet 1 illustrates the development of the Market Adjusted Index Rate. The market-wide adjustment for Risk Adjustment was discussed, previously. The risk adjustment is displayed on an allowed-basis and the exchange user fee is estimated as a PMPM based on the target premium rate on Worksheet 1 of the URRT.

### 14. Plan-Adjusted Index Rates

Section 3 of Worksheet 2 illustrates the development of the Plan Adjusted Index Rates and displays each plan-specific adjustment made to the Market Adjusted Index Rate. The 2023 Plan Adjusted Index Rates are displayed in Line 3.10. The following briefly describes how each set of adjustments was determined.

#### A. Actuarial Value, Cost Sharing:

The factors in Line 3.3 are the product of two separate adjustments:

1. We used internal models developed on large group claims experience to estimate the impact of different cost sharing designs. The combination of these two analyses is a projection of the relative paid to allowed ratio which also reflects the impact of out of network coverage.
2. We applied an adjustment for the impact different levels of cost sharing have on the use of medical services, which is based in part on the induced utilization factors used in the Risk Adjustment program. These adjustments are first normalized to result in an aggregate factor of 1.0 when applied to the projected 2023 membership.

#### B. Distribution and Administrative Costs:

Section 3 of Worksheet 2 also reflects the adjustment for projected administrative costs, including sales, marketing, any commission expense, profit, and risk. These are discussed above in the 'Non-Benefit Expenses and Profit & Risk' section, excluding the Risk Adjustment User Fee, and the Exchange User Fee, which are reflected in the Market-Adjusted Index Rate. These expense and profit assumptions do not vary by plan.

#### C. Provider Network, Delivery System, and Utilization Management:

The factors in Line 3.4 reflect the impact of differences in the network size, efficiency, and provider contract terms. We worked with our contracting area and other subject matter experts to review the impact of these differences and the expected impact on allowed claims.

#### D. Benefits in addition to EHBs:

The factors in Line 3.5 adjust for the impact of benefits in addition to EHBs.

#### E. Catastrophic Plan Eligibility:

This filing does not include catastrophic plans.

## 15. Calibration

### A. Age Curve Calibration:

The age factors are based on the HHS Default Standard Age curve. We then project a premium-weighted average age factor for the 2023 membership using the prescribed age curve and the projected age distribution. The calibration factor is the reciprocal of this weighted average factor.

The age that most closely corresponds to the premium weighted overall average age factor is the average age for the single risk pool.

### B. Geographic Factor Calibration:

Projected area factors are shown in Exhibit 3. Unit cost trend studies were used to evaluate whether there were significant changes to network costs that would require changes from previously filed rating area factors. The geographic calibration factor is the reciprocal of the projected average area factor

### C. Tobacco Factor Calibration

We are not applying a tobacco factor in our rating.

## 16. Consumer-Adjusted Premium Rate Development

Rates are determined using the prescribed member build-up approach. In the event that a family includes more than three child dependents under age 21, only the three oldest child dependents will be considered in determining the family's premium. Additional child dependents (non-billable members) will not be included in the rate calculation.

The premium for each billable member is calculated as:

Calibrated Plan Adjusted Index Rate \* Age Factor \* Area Factor \* Trend Factor

The resulting rate is rounded to the nearest cent, and rates are then summed for all billable family members.

An example of a contract's premium determined by the member build-up calculation is shown in Exhibit 9.

## 17. Composite Premiums

Small employers will be able to elect to have rates set using a composite approach as permitted by DC.

## 18. AV Metal Values

The AV Metal Values on Worksheet 2 were based on the Draft 2023 AV Calculator. As applicable, entries were modified to reflect the plan appropriately and/or adjustments were made for plan design features that could not be entered in the calculator per 45 CFR Part 156, §156.135. The accompanying certification discusses how the benefits were modified to fit the parameters and the development of any adjustments. The AV screen shots provide detail on the modified entries and adjustments to AV, as applicable.

## 19. AV Pricing Values

The AV Pricing Values are calculated as the ratio of the Plan Adjusted Index Rate to the Market Adjusted Index Rate. The adjustments reflected in the AV Pricing Values are discussed in Section 14. AV Pricing Values do not differ based on morbidity differences or benefit selection anticipated within the Single Risk Pool.

20. Membership Projections

Exhibit A summarizes the membership distribution by plan. Membership projections on Worksheet 2 are based on historical experience, enrollment in ACA-compliant plans through March 2022, and our expectations for future sales as additional members move to these plans from grandfathered and transitional plans.

Terminated Plans and Products

Exhibit 10 provides a plan and product crosswalk from 2021 to 2023. The crosswalk includes the list of products that have experience in the single risk pool experience period, and products that were made available in 2022 and 2023.

Consistent with the URRT instructions, experience for non-single risk pool terminated products is reported in aggregate under the terminated product with the largest membership in the experience period.

21. Plan Type

All plans are consistent with the plan type indicated on Worksheet 2.

22. Benefit Design

This filing includes one Expanded Bronze, two Silver, and four Gold plans.

Please refer to the corresponding policy forms for detailed benefit language. Exhibit A-2 provides the screenshots from the AV Calculator. All benefit and cost sharing parameters comply with DC benefit mandates and the requirements of PPACA, including preventive care benefits, deductible limits, and Actuarial Value requirements.

23. Marketing

Plans will be available outside of the public Marketplace. These plans may be marketed in a variety of means, including HHS Planfinder and our own website. In addition, members of our 2022 plans will be mailed a discontinuance or renewal letter, in accordance with CMS guidelines. Marketing and distribution approaches may change from time to time at management's discretion.

24. Underwriting

Aetna will verify applicant eligibility for these plans based on any applicable age or geographic limitations.

25. Renewability

These policies are guaranteed renewable as required under §2703 of the Public Health Service Act.

26. Company Financial Condition

As of December 31, 2021, the capital and surplus held by Aetna Life Insurance Company was approximately \$6.13 billion. This amount is disclosed in page 3, line 38 of the Company's statutory financial statement dated December 31, 2021. The Company issues insurance nationwide for multiple lines of business including, large group medical, Small Group medical, and various non-medical products.

Reliance

While I have reviewed the reasonableness of the assumptions and data in support of both the preparation of the Part I Unified Rate Review Template and the rate development applicable to the products discussed in this filing, I relied on the expertise of other Aetna employees, along with work products produced at their direction, for the following items:

- Experience Period MLR Rebates

- Risk Adjustment Transfer
- Actuarial Value, Modifications, and Benefit Relativities
- Supplemental EHB Pricing
- Population Risk Morbidity
- Medical Cost and Utilization Trend
- Rx Cost and Utilization Trend
- Components of Retention/Administrative Fees
- Value of Network Arrangements
- MH Net Trend
- Experience Period Data – Small Group

#### Certification

While this memorandum discusses both our development of rates for these products and the completion of the Part I Unified Rate Review Template (URRT), the Part I URRT does not demonstrate the process used by Aetna to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of qualified health plans for Federally-facilitated marketplaces, and for certification that the index rate is developed in accordance with Federal regulation, is used consistently, and is only adjusted by the allowable modifiers. The information provided above is intended to comply with these requirements.

I, Joanna Kluza, am an Associate of the Society of Actuaries, a member of the American Academy of Actuaries, and am qualified in the area of health insurance. I hereby certify that to the best of my knowledge and judgment:

1. This rate filing is in compliance with the applicable laws and regulations of the District of Columbia, the requirements under federal law and regulation, and all applicable Actuarial Standards of Practice, including but not limited to:
  - a. ASOP No. 5, Incurred Health and Disability Claims
  - b. ASOP No. 8, Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health
  - c. ASOP No. 12, Risk Classification
  - d. ASOP No. 23, Data Quality
  - e. ASOP No. 25, Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverages
  - f. ASOP No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans
  - g. ASOP No. 41, Actuarial Communications
  - h. ASOP No. 50, Determining Minimum Value and Actuarial Value under the Affordable Care Act
2. The Projected Index Rate is:
  - a. In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80(d)(1) and 147.102),
  - b. Developed in compliance with the applicable Actuarial Standards of Practice,
  - c. Reasonable in relation to the benefits provided and the population anticipated to be covered,
  - d. Neither excessive, deficient, nor unfairly discriminatory.

3. The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan-level rates.
4. Adjustments to the MAIR for benefits the plan offers in addition to essential health benefits included in Worksheet 2, Section III were calculated in accordance with actuarial standards of practice.
5. The geographic rating factors reflect only differences in the costs of delivery (which include unit costs and provider practice pattern differences) and do not include differences for population morbidity by geographic area.
6. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Adjustments made to reflect benefit features not handled by the AV Calculator are discussed in the attached certification required by 45 CFR Part 156, §156.135.



---

Joanna Kluza, ASA, MAAA  
Aetna Life Insurance Company

May 2, 2022

---

Date



## Actuarial Memorandum and Certification

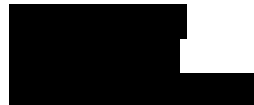
### General Information

#### *Company Identifying Information:*

**Company Legal Name:** Aetna Life Insurance Company  
**State:** District of Columbia  
**HIOS Issuer ID:** 77422  
**Market:** Small Group  
**Effective Date:** 01/01/2023  
**Rate Filing Tracking Number:** AETN-133232233  
**Policy Form(s):**  
**Form Filing Tracking Number:** AETN-132731328

#### *Company Contact Information:*

**Name:**  
**Telephone Number:**  
**Email Address:**



### 1. Purpose, Scope, and Effective Date

The purpose of this filing is to:

- 1) Provide support for the development of the Part I Unified Rate Review Template;
- 2) Provide support for the assumptions and premiums rate development for the products supported by the policy forms referenced above;
- 3) Request approval of the proposed monthly premium rates; and
- 4) Provide benefit plan designs summaries for the products included in this filing.

The development of the rates reflects the impact of the market forces and rating requirements associated with the Patient Protection and Affordable Care Act (PPACA) and subsequent regulation.

These rates are for plans issued in District of Columbia beginning January 1, 2023. The rates comply with all rating guidelines under federal and state regulations. The filing covers plans that will be offered outside the public Marketplace in District of Columbia.

### 2. Proposed Rate Increase

Monthly premium rates for Small Group Market products in District of Columbia are being revised for effective dates January 1, 2023 through December 31, 2023.

#### A. Reason for Rate Increase(s):

- Impact of medical claim trend (including changes in provider unit costs and increased utilization of medical cost services) and pharmacy trend;
- Revisions to our assumptions about market-wide population morbidity and the projected population distribution;
- Revisions to administrative expense projections;
- Modifications in cost sharing to ensure that plans comply with Actuarial Value requirements;
- Updates to our pricing models used to determine the impact of cost sharing designs;
- Changes in provider networks and contracts.

B. Variation in Rate Changes by Plan/Product:

Rate changes differ by plan for the following reasons:

- Provider cost estimates have been updated, and the change differs by network.
- Modification to cost sharing differs by plan in order to maintain compliance with Actuarial Value and other regulatory requirements.
- Our internal pricing models have been updated to reflect more current information on levels of induced demand associated with different benefit designs. These changes impact our estimates of the relative costs of the plan designs that will be offered.

Exhibit 1 shows the average threshold increases for products covered by this filing.

3. Experience Period Premium and Claims

A. Paid Through Date:

The experience data reported in Worksheet 1, Section I of the Part I Unified Rate Review Template reflects incurred claims from January 1, 2021 through December 31, 2021 and paid through March 31, 2022.

B. Current Date: The current enrollment and premium is reported as of March 31, 2022.

C. Premiums (Net of MLR Rebate) in Experience Period:

Experience period premiums are date-of-service premiums from our actuarial experience databases for non-grandfathered Small Group business in District of Columbia.

D. Allowed and Incurred Claims Incurred During the Experience Period:

Allowed and incurred claims are sourced from our actuarial experience databases. These databases provide member-level detail on total allowed and incurred claims but do not include unit cost or utilization metrics. We allocate claims to cost categories and estimate the corresponding unit costs and utilization metrics by using an alternate reporting system that calculates unit cost and utilization metrics by medical cost category but only permits inclusion/exclusion of experience at the market and segment levels. A reconciliation of aggregate data in our actuarial experience databases is performed to ensure that data is consistent with the experience data contained in our enterprise-wide data warehouse.

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

As noted above, the experience period reflects three months of paid claim run-off.

#### 4. Benefit Categories

Our internal systems assign claims to several benefit categories. We have mapped these categories to the categories described in the Unified Rate Review Instructions released in April 2022. Inpatient Hospital consists of care delivered at an inpatient facility and associated expenses, including day-based mental health services. Outpatient Hospital includes outpatient surgical, outpatient mental health, and emergency care and associated expenses. Professional includes both specialty physician and primary care physician expenses, including office-based mental health services. Other includes dental, home health care, medical pharmacy expenses, laboratory expenses, and radiology expenses. Non-capitated ambulance is included in the Outpatient Hospital category when billed by the facility and included in Specialist Physician otherwise. Prescription Drug includes drugs dispensed by a pharmacy.

The utilization for these services are counted by service type, and aggregated for each benefit category. Inpatient Hospital utilization is counted as days; Outpatient Hospital, Professional, and Other Medical utilization are counted as visits. Prescription Drug utilization is counted per script.

#### 5. Projection Factors

##### A. Changes in the Morbidity of the Population Insured:

The experience period data includes experience for community-rated policies issued to small employers in 2021.

We also considered the expected morbidity of the DC small group ACA population and the likely population that will be covered by Small Group Single Risk Pool policies in 2023 and have adjusted our projections for this morbidity change accordingly.

##### B. Plan Design Changes:

The products included in this filing include benefits necessary to comply with the Essential Health Benefit requirements. The experience data includes experience for Single Risk Pool products that have essentially identical benefits and coverage issued outside the Single Risk Pool which does not cover all EHBs. The projection factor reflects the pro-rated impact of these additional benefits, as well as any changes in 2023 State Benchmark EHBs, and newly mandated benefits.

The change in projected utilization due to changes in benefits is also considered. As cost sharing decreases (measured by increasing Actuarial Value), utilization increases. This pattern is reflected in the factors that are built into the federal risk adjustment mechanism that started in 2014. The federal risk adjustment program factors and other proprietary models were considered in the development of the utilization change. The average cost sharing in the experience period was compared with the average cost sharing in the projection period. From the average cost sharing change, an expected utilization change was derived.

C. Changes in Demographics:

Experience data was normalized for projected changes in the age/gender mix and area mix using internally-developed factors. Exhibits 2 and 3 contain detail on the calculations of the impact of demographic mix shifts.

D. Other Adjustments:

The 'Other' adjustment includes the projected impact of changes in network composition and provider contracts, expected morbidity changes, changes in benefits, and changes in demographics.

E. Trend Factors (Cost/Utilization):

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

6. Manual Rate Adjustments:

A. Source and Appropriateness of Experience Data Used:

[REDACTED]

B. Adjustments Made to the Data:

[REDACTED]

C. Inclusion of Capitation Payments:

[REDACTED]

7. Credibility of Experience

[REDACTED]

8. Risk Adjustment

A. Risk Adjustment – Experience Period

[REDACTED]

B. Risk Adjustment – Projection Period

[REDACTED]

[REDACTED]

[REDACTED]

9. Non-Benefit Expenses and Profit & Risk

[REDACTED]

[REDACTED]

Actual general and administrative expenses are based on historical corporate Small Group market expense levels, 2022 projections, and projected changes in expenses, inflation, and membership for 2023 for our National book of Small Group business.

A flat commission per policy per month will be paid to all brokers in DC during open enrollment. Commissions do not vary by plan.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax and State Premium taxes. State premium taxes are estimated on most current known levels and include any known assessments.

[REDACTED]

10. Projected Loss Ratio

[REDACTED]

11. Single Risk Pool

The plans and rates included in the Part I URRT are those for all plans we intend to offer in the Small Group market in the District of Columbia through Aetna Life Insurance Company. The proposed rates comply with the Single Risk Pool requirements of 45 CFR §156.80(d).

12. Index Rate

The index rates for the experience and projection periods are set equal to the actual and projected allowed claims, respectively, less non-essential health benefits.

The index rate reflects the projected mix of business by plan. The AV pricing values for each plan are based on our internal company modeling of plan cost-sharing designs, the plan's provider network, delivery system characteristics, and utilization management practices, the impacts (as applicable) of benefits in addition to EHBs catastrophic eligibility criteria, and the distribution and administrative costs applicable to the plan/product. Rates do not differ for any characteristic other than those allowable under the regulations as described in 45 CFR 156 §156.80(d)(2).

**Small Group Market Trend Adjustments:**

[REDACTED]

**13. Market-Adjusted Index Rate**

[REDACTED]

**14. Plan-Adjusted Index Rates**

[REDACTED]

**A. Actuarial Value, Cost Sharing:**

[REDACTED]

**B. Distribution and Administrative Costs:**

[REDACTED]

**C. Provider Network, Delivery System, and Utilization Management:**

[REDACTED]

**D. Benefits in addition to EHBs:**

[REDACTED]

**E. Catastrophic Plan Eligibility:**

This filing does not include catastrophic plans.

## 15. Calibration

### A. Age Curve Calibration:

[REDACTED]

### B. Geographic Factor Calibration:

[REDACTED]

### C. Tobacco Factor Calibration

We are not applying a tobacco factor in our rating.

## 16. Consumer-Adjusted Premium Rate Development

Rates are determined using the prescribed member build-up approach. In the event that a family includes more than three child dependents under age 21, only the three oldest child dependents will be considered in determining the family's premium. Additional child dependents (non-billable members) will not be included in the rate calculation.

The premium for each billable member is calculated as:

Calibrated Plan Adjusted Index Rate \* Age Factor \* Area Factor \* Trend Factor

The resulting rate is rounded to the nearest cent, and rates are then summed for all billable family members.

[REDACTED]

## 17. Composite Premiums

Small employers will be able to elect to have rates set using a composite approach as permitted by DC.

## 18. AV Metal Values

The AV Metal Values on Worksheet 2 were based on the Draft 2023 AV Calculator. As applicable, entries were modified to reflect the plan appropriately and/or adjustments were made for plan design features that could not be entered in the calculator per 45 CFR Part 156, §156.135. The accompanying certification discusses how the benefits were modified to fit the parameters and the development of any adjustments. The AV screen shots provide detail on the modified entries and adjustments to AV, as applicable.

## 19. AV Pricing Values

The AV Pricing Values are calculated as the ratio of the Plan Adjusted Index Rate to the Market Adjusted Index Rate. The adjustments reflected in the AV Pricing Values are discussed in Section 14. AV Pricing Values do not differ based on morbidity differences or benefit selection anticipated within the Single Risk Pool.

## 20. Membership Projections

[REDACTED]

## Terminated Plans and Products

Exhibit 10 provides a plan and product crosswalk from 2021 to 2023. The crosswalk includes the list of products that have experience in the single risk pool experience period, and products that were made available in 2022 and 2023.

Consistent with the URRT instructions, experience for non-single risk pool terminated products is reported in aggregate under the terminated product with the largest membership in the experience period.

## 21. Plan Type

All plans are consistent with the plan type indicated on Worksheet 2.

## 22. Benefit Design

This filing includes one Expanded Bronze, two Silver, and four Gold plans.

Please refer to the corresponding policy forms for detailed benefit language. Exhibit A-2 provides the screenshots from the AV Calculator. All benefit and cost sharing parameters comply with DC benefit mandates and the requirements of PPACA, including preventive care benefits, deductible limits, and Actuarial Value requirements.

## 23. Marketing

Plans will be available outside of the public Marketplace. These plans may be marketed in a variety of means, including HHS Planfinder and our own website. In addition, members of our 2022 plans will be mailed a discontinuance or renewal letter, in accordance with CMS guidelines. Marketing and distribution approaches may change from time to time at management's discretion.

## 24. Underwriting

Aetna will verify applicant eligibility for these plans based on any applicable age or geographic limitations.

## 25. Renewability

These policies are guaranteed renewable as required under §2703 of the Public Health Service Act.

## 26. Company Financial Condition

[REDACTED]

## Reliance

While I have reviewed the reasonableness of the assumptions and data in support of both the preparation of the Part I Unified Rate Review Template and the rate development applicable to the products discussed in this filing, I relied on the expertise of other Aetna employees, along with work products produced at their direction, for the following items:

[REDACTED]



[REDACTED]

### Certification

While this memorandum discusses both our development of rates for these products and the completion of the Part I Unified Rate Review Template (URRT), the Part I URRT does not demonstrate the process used by Aetna to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of qualified health plans for Federally-facilitated marketplaces, and for certification that the index rate is developed in accordance with Federal regulation, is used consistently, and is only adjusted by the allowable modifiers. The information provided above is intended to comply with these requirements.

I, [REDACTED], am [REDACTED], and am qualified in the area of health insurance. I hereby certify that to the best of my knowledge and judgment:

1. This rate filing is in compliance with the applicable laws and regulations of the District of Columbia, the requirements under federal law and regulation, and all applicable Actuarial Standards of Practice, including but not limited to:
  - a. ASOP No. 5, Incurred Health and Disability Claims
  - b. ASOP No. 8, Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health
  - c. ASOP No. 12, Risk Classification
  - d. ASOP No. 23, Data Quality
  - e. ASOP No. 25, Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverages
  - f. ASOP No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans
  - g. ASOP No. 41, Actuarial Communications
  - h. ASOP No. 50, Determining Minimum Value and Actuarial Value under the Affordable Care Act
2. The Projected Index Rate is:
  - a. In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80(d)(1) and 147.102),
  - b. Developed in compliance with the applicable Actuarial Standards of Practice,
  - c. Reasonable in relation to the benefits provided and the population anticipated to be covered,
  - d. Neither excessive, deficient, nor unfairly discriminatory.

3. The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan-level rates.
4. Adjustments to the MAIR for benefits the plan offers in addition to essential health benefits included in Worksheet 2, Section III were calculated in accordance with actuarial standards of practice.
5. The geographic rating factors reflect only differences in the costs of delivery (which include unit costs and provider practice pattern differences) and do not include differences for population morbidity by geographic area.
6. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Adjustments made to reflect benefit features not handled by the AV Calculator are discussed in the attached certification required by 45 CFR Part 156, §156.135.

May 2, 2022

\_\_\_\_\_  
Aetna Life Insurance Company

\_\_\_\_\_  
Date

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
<b>Product Name:</b>	2023 DC ALIC PPO SG		
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC		

## Supporting Document Schedules

<b>Bypassed - Item:</b>	Actuarial Justification
<b>Bypass Reason:</b>	This is not a new form filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Certificate of Authority to File
<b>Bypass Reason:</b>	The filing is made by Aetna.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Cover Letter
<b>Comments:</b>	
<b>Attachment(s):</b>	DC SG SHOP Cover Letter - ALIC 1Q23.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	DISB Actuarial Memorandum Dataset
<b>Comments:</b>	
<b>Attachment(s):</b>	DISB Actuarial Memo Dataset 2023_ALIC.xlsx
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
<b>Bypass Reason:</b>	This is not a P&C filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
<b>Bypass Reason:</b>	This is not a P&C filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Aetna Life Insurance Company
<b>TOI/Sub-TOI:</b>	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
<b>Product Name:</b>	2023 DC ALIC PPO SG		
<b>Project Name/Number:</b>	2023 Exchanges - Aetna/ALIC		

<b>Satisfied - Item:</b>	District of Columbia Plain Language Summary
<b>Comments:</b>	
<b>Attachment(s):</b>	DISB Plain Language Summary - ALIC - 1Q2023.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Additional Supporting Documentation
<b>Comments:</b>	
<b>Attachment(s):</b>	AV Certification_2023_DC ALIC.pdf Exhibit A-1 - ALIC Rate Change by plan_2023.pdf Exhibit A-2 - AV Screenshoots_2023 ALIC.pdf Exhibit 12 - ALIC Key Factors_1Q2023.pdf DISB Filing Checklist - ALIC 2023.pdf DC_SG_77422_Part_III_Exhibits_1Q2023_ALIC.pdf DC_SG_77422_Part_III_Exhibits_1Q2023_ALIC.xlsx DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

State:	District of Columbia	Filing Company:	Aetna Life Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO		
Product Name:	2023 DC ALIC PPO SG		
Project Name/Number:	2023 Exchanges - Aetna/ALIC		

**Attachment DISB Actuarial Memo Dataset 2023\_ALIC.xlsx is not a PDF document and cannot be reproduced here.**

**Attachment DC\_SG\_77422\_Part\_III\_Exhibits\_1Q2023\_ALIC.xlsx is not a PDF document and cannot be reproduced here.**



151 Farmington Ave.  
Hartford, CT 06105

May 2, 2022

Mr. Efren Tanhehco  
Supervising Actuary  
District of Columbia Department of Insurance & Securities Regulation  
810 First Street NE, 6<sup>th</sup> Floor  
Washington, DC 20002

Subject: Aetna Life Insurance Company - NAIC Number 60054  
Small Group Premium Rate Filing – DC On Exchange  
Effective dates January 1, 2023 – December 31, 2023

Dear Mr. Tanhehco:

I am writing to request approval of the attached Rate Filing for plans offered to Small Groups by Aetna Life Insurance Company sold on the DC Exchange. This filing is for effective dates January 1, 2023 – December 31, 2023. This filing contains the benefit plans and rating methodology. The average rate revision proposed is an increase of 5.01%.

The requested rates have been developed incorporating consideration of the market changes and rating requirements taking effect in the Small Group Market and conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010. Additionally, these health benefit plans conform to each respective tier of coverage, defined as Bronze, Silver, and Gold.

This filing is for Aetna's Small Group PPO Medical Expense coverage.

The following supporting documentation is also included:

- 1) An Actuarial Certification
- 2) An Actuarial Memorandum including supporting exhibits and documentation

The forms filing has been submitted under separate cover and the SERFF Filing ID # is AETN-133139941.

The purpose of this rate filing is to comply with regulatory rate filing requirements. This filing is not intended to be used for other purposes. If you need additional information, please contact me by telephone at (860) 273-0099, or via e-mail at [KluzaJ@aetna.com](mailto:KluzaJ@aetna.com).

Sincerely,

A handwritten signature in cursive script that reads "Joanna Kluza".

Joanna Kluza, ASA, MAAA

**Certificate Form Names and Numbers**

<i>Form Name</i>	<i>Form Number</i>
AL DC SG HHIX COC-EPO V007	AL DC SG HHIX COC-EPO V007
AL SG HCOC-2023-EPO 07-HIX	AL SG HCOC-2023-EPO 07-HIX

**Schedule Form Names and Numbers**

<i>Form Name</i>	<i>Form Number</i>
AL DC SG-HIXSOB-14050619 V007	AL DC SG HIX SOB EPO 14050619
AL DC SG-HIXSOB-14050613 V007	AL DC SG HIX SOB EPO 14050613
AL DC SG-HIXSOB-14050616 V007	AL DC SG HIX SOB EPO 14050616
AL DC SG-HIXSOB-14051067 V007	AL DC SG HIX SOB EPO 14051067
AL DC SG-HIXSOB-14051068 V007	AL DC SG HIX SOB EPO 14051068
AL DC SG-HIXSOB-14051066 V007	AL DC SG HIX SOB EPO 14051066
AL DC SG-HIXSOB-14050614 V007	AL DC SG HIX SOB EPO 14050614

## Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF file under the Consumer Disclosure Form section of the Supporting Documentation tab.

Name of Company      Aetna Life Insurance Company

SERFF tracking number      AETN-133232233

Submission Date      May 2,2022

Product Name      DC ALIC PPO SG 2023

Market Type      ☐ Individual      ☒ Small Group

Rate Filing Type      ☒ Rate Increase      ☐ New Filing

### Scope and Range of the Increase:

The 5.01% increase is requested because:

Rates are updated to reflect the impact of medical trend, revisions to our assumptions about population morbidity and projected population, changes in cost sharing levels to ensure compliance with Actuarial Value requirements, and changes in provider networks and contracts.

This filing will impact:

# of policyholder's      199

# of covered lives      236

The average, minimum and maximum rate changes increases are:

- Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved 5.01 %
- Minimum Rate Change: The smallest premium increase (or largest decrease), by percentage, that any one policy holder would experience if the filing is approved -2.5 %
- Maximum Rate Change: The largest premium increase, by percentage, that any one policy holder would experience if the filing is approved 10.1 %

Individuals within the group may vary from the aggregate of the above increase components as a result of:

The benefit plan the individual chooses, when the member's group contract renews, the age and family size and age for enrolling employees and employer contributions.

### Financial Experience of Product

The overall financial experience of the product includes:

The 2021 experience generated by the plans offered under this product produced a loss ratio that was unfavorable to the target loss ratio before risk adjustment. Due to the low volume of members that have enrolled in these plans the 2021 experience is not credible.



The rate increase will affect the projected financial experience of the product by:

The rate revision is not expected to impact the profitability of the product. That is, the target profit margin is unchanged

### **Components of Increase**

The request is made up of the following components:

*Trend Increases* – 216. % of the 5.01 % total filed increase

1. Medical Utilization Changes – Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.

This component is 117. % of the 5.01 % total filed increase.

2. Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.

This component is 99.4% of the 5.01 % total filed increase.

*Other Increases* – -116 % of the 5.01 % total filed increase

1. Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.

This component is 111.% of the 5.01 % total filed increase.

2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.

This component is 0 % of the 5.01 % total filed increase.

3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.

This component is 4.72 % of the 5.01 % total filed increase.

4. Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cover the risk of the company.

This component is -17.1 % of the 5.01 % total filed increase.

5. Other – Defined as:

Changes in commission, benefit slope, risk adjustment, provider contracting, experience and population risk.

This component is -214% of the 5.01 % total filed increase.

## Actuarial Value Certification

State: DC  
Plan Year: 2023  
HIOS Issuer ID: 77422  
HIOS Product Ids: 77422DC011

HIOS Plan Ids: 77422DC0110002  
77422DC0110010  
77422DC0110007  
77422DC0110006

Per 156.135, the AV must be certified by a member of the American Academy of Actuaries using generally accepted actuarial principles and methodologies. There are 3 types of certification:

- (1) Option 1 - Certify that the plan was entered correctly and does not vary materially from standard options entered
- (2) Option 2 - Certify that entries into the calculator were modified to reflect the plan appropriately [156.135.(b).(2) ]
- (3) Option 3 - Used the calculator for provisions that fit and made adjustment for plan design features that deviate outside of calculator [156.135.(b).(3) ]

The plans listed meet the criteria for Option 1 - the plans were entered correctly and do not vary materially from the standard options entered.

In addition, a 0.9999 factor is applied to the average coinsurance in row 11 for most plans. While not materially impacting the entered benefit value, this methodology prevents the OP facility/physician splitting methodology from being invoked which we do not believe is appropriate for our benefit plans.

The output from this consistently-applied process reflects our certified Actuarial Values.

### Certification Language:


The development of the actuarial value was determined in accordance with the ASOPs established by the ASB and with applicable laws and regulations.

This analysis was conducted by a member of the American Academy of Actuaries that meets the Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States promulgated by the American Academy of Actuaries, and has the education and experience necessary to perform the work.

The certifying actuary is an employee of Aetna.

This certification supports plans offered in the Small Group market.

Metal levels were appropriately assigned based on applicable law.

Actuary Signature:   
Actuary Printed name: Joanna Kluzza, ASA, MAAA  
Date: 5/2/2023

**Unique Plan Design - Issuer Actuarial Value  
Supporting Documentation and Justification**

State: DC  
Plan Year: 2023  
HIOS Issuer ID: 77422  
HIOS Product Ids: 77422DC011

HIOS Plan Ids: 77422DC0110009  
77422DC0110003  
77422DC0110005

**1) Justification for use of Issuer AV:**

Per 156.135, the AV must be certified by a member of the American Academy of Actuaries using generally accepted actuarial principles and methodologies. There are 3 types of certification:

- (1) Option 1 - Certify that the plan was entered correctly and does not vary materially from standard options entered
- (2) Option 2 - Certify that entries into the calculator were modified to reflect the plan appropriately [156.135.(b).(2) ]
- (3) Option 3 - Used the calculator for provisions that fit and made adjustment for plan design features that deviate outside of calculator [156.135.(b).(3) ]

Aetna benefit plans were analyzed vs the AVC to determine when Option 2 and/or Option 3 vs Option 1 certification was necessary. Four underlying calculators were built to support population of the Mental Health OP, Specialist OV, ER, and Rx generic rows in the AVC. These all support Option 2 certifications, but only the calculators used are referenced below. A separate calculator was used for plans with True Individual Family (TIF) deductibles in support of Option 3. Again, only if the calculator was used would it be referenced below. In addition, a 0.9999 factor is applied to the average coinsurance in row 11 for most plans. While not materially impacting the entered benefit value, this methodology prevents the OP facility/physician splitting methodology from being invoked which we do not believe is appropriate for our benefit plans. The output from this consistently-applied process reflects our certified Actuarial Values.

**2) Regulatory permitted alternate method used:**

(2) Option 2 - Certify that entries into the calculator were modified to reflect the plan appropriately [156.135.(b).(2) ]

77422DC0110009  
77422DC0110005

(3) Option 3 - Used calculator for provisions that fit and made adjustment for plan design features that deviate outside of calculator [156.135.(b).(3) ]

77422DC0110003

**3) Confirmation that only in-network cost sharing including multitier networks, was considered:**

Confirmed. Only in-network cost sharing information was used.

**4) Description of standardized plan population data used:**

Detail of data used for each of the subcalculators is described below in items 5 & 6. All data was based on either the AVC continuance tables, or a national data set which is representative of the SG population

**5) If the method described in 156.135.(b).(2) was used, description of how the benefits were modified to fit the parameters of the AV calculator:**

77422DC0110009  
77422DC0110005

**MH OP Benefit Plan Fit Process**

MH OP has two subcategories: MH OP - Office Visit and MH OV - All Other. The equivalent coinsurance for each was set as the plan copay divided by the unit cost. The adjusted equivalent coinsurance was then calculated for each copay/deductible combination. If there was non-uniform deductible applicability, the equivalent coinsurance was calculated that produced the same net impact as assuming both subcategories had no deductible apply. This was based on the distribution of claims cost from the AVC continuance tables, adjusted to take into account the impact of the OOP Max. The average coinsurance of the row was calculated based on the weightings of the internal subcategories. This coinsurance was then converted to a copay based on the average unit cost from the aforementioned continuance tables.

77422DC0110005

**ER Benefit Plan Fit Process**

Where both an ER copay and coinsurance exist, we calculated a coinsurance equivalent amount. The copay visit costs were converted to equivalent coinsurance using the AVC continuance table average unit costs. The copay equivalent coinsurance was then multiplied by the actual coinsurance as the aggregate equivalent coinsurance.

**6) If the method described in 156.135.(b).(3) was used, description of the data and method used to develop the adjustments:**

77422DC0110003

**TIF (True individual family) Deductible**

For plans with a TIF deductible, the average change in paid to allowed due to this feature was determined based on internal cost data and a SG appropriate distribution of single vs family members. That process produces an additive adjustment to the AV obtained via the methodology described above in support of 156.135.(b).(2) certifications.

**Certification Language:**


The development of the actuarial value was determined in accordance with the ASOPs established by the ASB and with applicable laws and regulations.

This analysis was conducted by a member of the American Academy of Actuaries that meets the Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States promulgated by the American Academy of Actuaries, and has the education and experience necessary to perform the work.

The certifying actuary is an employee of Aetna.

This certification supports plans offered in the Small Group market.

Metal levels were appropriately assigned based on applicable law.

Actuary Signature:   
Actuary Printed name: Joanna Kluza, ASA, MAAA  
Date: 5/2/2023

**Aetna Life Insurance Company**  
**HIOS ISSUER ID: 77422**

**Exhibit A-1**  
**Rate Change by Plan**

2022 HIOS Plan ID	2022 Plan Name	1Q2022 Premium Rate	2023 HIOS Plan ID	2023 Plan Name	1Q2023 Premium Rate	Rate Change
77422DC0110001	DC Bronze OAEPO 6000 80% \$15/50 E	\$386.07	77422DC0110009	DC Bronze OAEPO 7500 60% \$45/105 M	\$385.36	-0.2%
77422DC0110002	DC Gold OAEPO 1500 90% E	\$589.64	77422DC0110002	DC Gold OAEPO 1500 90% E	\$622.38	5.6%
77422DC0110003	DC Gold OAEPO 1650 100% HSA T	\$567.63	77422DC0110003	DC Gold OAEPO 1650 100% HSA T	\$614.60	8.3%
77422DC0110004	DC Gold OAEPO 500 90% \$25/40 E	\$625.49	77422DC0110010	DC Gold OAEPO 500 80% \$25/50 M	\$660.01	5.5%
77422DC0110005	DC Gold OAEPO 70% \$25/40 E	\$636.30	77422DC0110005	DC Gold OAEPO 70% \$25/70 E	\$635.94	-0.1%
77422DC0110006	DC Silver OAEPO 3000 100% HSA E	\$511.00	77422DC0110006	DC Silver OAEPO 3000 100% HSA E	\$497.88	-2.6%
77422DC0110007	DC Silver OAEPO 4800 80% \$25/45 E	\$447.14	77422DC0110007	DC Silver OAEPO 4850 80% \$40/80 M	\$484.78	8.4%

# DC Gold OAEPO 1650 100% HSA T

## Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

### User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☒  
 Apply Inpatient Copay per Day? ☐  
 Apply Skilled Nursing Facility Copay per Day? ☐  
 Use Separate MOOP for Medical and Drug Spending? ☐  
 Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: Gold

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design		
Medical	Drug	Combined
		\$1,650.00
		90.00%
		\$7,000.00

Tier 2 Plan Benefit Design		
Medical	Drug	Combined

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

### Plan Description:

Name: DC Gold OAEPO 1650 100% HSA T  
 Plan HIOS ID: 77422DC0110003  
 Issuer HIOS ID: 77422  
 AVC Version: 2023\_1e

### Output

Calculate

Status/Error Messages:

Actuarial Value: 82.35%

Metal Tier:

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0547 seconds

Draft 2023 AV Calculator

Option 3 Additive TIF adj

-1.00%

Final AV

81.35%

This product, DC Gold OAEPO 1650 100% HSA T, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 81.35%

## DC Silver OAEPO 3000 100% HSA E

### Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

#### User Inputs for Plan Parameters

- ☒ Use Integrated Medical and Drug Deductible?  
☐ Apply Inpatient Copay per Day?  
☐ Apply Skilled Nursing Facility Copay per Day?  
☐ Use Separate MOOP for Medical and Drug Spending?  
☐ Indicate if Plan Meets CSR or Expanded Bronze AV Standard?

Desired Metal Tier: **Silver**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design		
Medical	Drug	Combined
		\$3,000.00
		90.00%
		\$7,000.00

Tier 2 Plan Benefit Design		
Medical	Drug	Combined

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$750.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$40.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$10.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$10.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

#### Plan Description:

**Name:** DC Silver OAEPO 3000 100% HSA E  
**Plan HIOS ID:** 77422DC0110006  
**Issuer HIOS ID:** 77422  
**AVC Version:** 2023\_1e

#### Output

#### Status/Error Messages:

**Actuarial Value:** 71.98%  
**Metal Tier:** Silver

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

#### Additional Notes:

#### Calculation Time:

0.0469 seconds

#### Draft 2023 AV Calculator

This product, DC Silver OAEPO 3000 100% HSA E, satisfies the HHS guidelines for a Silver plan with an Actuarial Value of 71.98%

DC Gold OAEPO 70% \$25/70 E

## Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

### User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐  
Apply Inpatient Copay per Day? ☐  
Apply Skilled Nursing Facility Copay per Day? ☐  
Use Separate MOOP for Medical and Drug Spending? ☐  
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: **Gold**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$0.00	\$0.00			
Coinsurance (%; Insurer's Cost Share)	70.00%	100.00%			
MOOP (\$)	\$9,000.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	58%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$24.66	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

### Plan Description:

Name: DC Gold OAEPO 70% \$25/70 E  
Plan HIOS ID: 77422DC0110005  
Issuer HIOS ID: 77422  
AVC Version: 2023\_1e

### Output

Status/Error Messages:

Actuarial Value: 81.61%

Metal Tier: Gold

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0703 seconds

Draft 2023 AV Calculator

This product, DC Gold OAEPO 70% \$25/70 E, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 81.61%

## DC Gold OAEPO 1500 90% E

### Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

#### User Inputs for Plan Parameters

- ☐ Use Integrated Medical and Drug Deductible?  
☐ Apply Inpatient Copay per Day?  
☐ Apply Skilled Nursing Facility Copay per Day?  
☐ Use Separate MOOP for Medical and Drug Spending?  
☐ Indicate if Plan Meets CSR or Expanded Bronze AV Standard?

Desired Metal Tier: **Gold**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design		
Medical	Drug	Combined
Deductible (\$) \$1,500.00	\$0.00	
Coinsurance (% Insurer's Cost Share) 90.00%	100.00%	
MOOP (\$) \$8,150.00		
MOOP if Separate (\$)		

Tier 2 Plan Benefit Design		
Medical	Drug	Combined

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$650.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input type="checkbox"/>		\$15.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$500.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	100%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

#### Plan Description:

**Name:** DC Gold OAEPO 1500 90% E  
**Plan HIOS ID:** 77422DC0110002  
**Issuer HIOS ID:** 77422  
**AVC Version:** 2023\_1e

#### Output

Calculate

#### Status/Error Messages:

**Actuarial Value:** 80.77%  
**Metal Tier:** Gold

#### Additional Notes:

NOTE: One or more services are not subject to the deductible and have no copay. Any service with this cost-sharing structure is covered at 100% by the plan in the deductible range. NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

#### Calculation Time:

0.0625 seconds

Draft 2023 AV Calculator

This product, DC Gold OAEPO 1500 90% E, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 80.77%



DC Gold OAEPO 500 80% \$25/50 M

## Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

### User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐  
Apply Inpatient Copay per Day? ☒  
Apply Skilled Nursing Facility Copay per Day? ☒  
Use Separate MOOP for Medical and Drug Spending? ☐  
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: **Gold**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$500.00	\$0.00			
Coinsurance (%; Insurer's Cost Share)	100.00%	100.00%			
MOOP (\$)	\$5,800.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input type="checkbox"/>	<input type="checkbox"/>		\$300.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$600.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input type="checkbox"/>	<input type="checkbox"/>		\$250.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$30.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$30.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input type="checkbox"/>		\$30.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input type="checkbox"/>	<input type="checkbox"/>		\$300.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input type="checkbox"/>	<input type="checkbox"/>		\$525.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input type="checkbox"/>	<input type="checkbox"/>		\$75.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$15.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input type="checkbox"/>	<input type="checkbox"/>		\$150.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input type="checkbox"/>
Specialty Rx Coinsurance Maximum:	
Set a Maximum Number of Days for Charging an IP Copay?	<input checked="" type="checkbox"/>
# Days (1-10):	5
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

### Plan Description:

Name: DC Gold OAEPO 500 80% \$25/50 M  
Plan HIOS ID: 77422DC0110010  
Issuer HIOS ID: 77422  
AVC Version: 2023\_1e

### Output

Status/Error Messages:

Actuarial Value: 81.88%

Metal Tier: Gold

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0703 seconds

Draft 2023 AV Calculator

This product, DC Gold OAEPO 500 80% \$25/50 M, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 81.88%

DC Silver OAEPO 4850 80% \$40/80 M

## Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

### User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐  
Apply Inpatient Copay per Day? ☐  
Apply Skilled Nursing Facility Copay per Day? ☐  
Use Separate MOOP for Medical and Drug Spending? ☐  
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: **Silver**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$4,850.00	\$350.00			
Coinsurance (%; Insurer's Cost Share)	80.00%	100.00%			
MOOP (\$)	\$8,850.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$400.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$40.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$40.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input type="checkbox"/>	<input type="checkbox"/>		\$400.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input checked="" type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input type="checkbox"/>		\$60.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$20.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$150.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input type="checkbox"/>
Specialty Rx Coinsurance Maximum:	
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

### Plan Description:

Name: DC Silver OAEPO 4850 80% \$40/80 M  
Plan HIOS ID: 77422DC0110007  
Issuer HIOS ID: 77422  
AVC Version: 2023\_1e

### Output

### Status/Error Messages:

Actuarial Value: 71.82%  
Metal Tier: Silver

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

### Additional Notes:

Calculation Time: 0.0859 seconds

Draft 2023 AV Calculator

This product, DC Silver OAEPO 4850 80% \$40/80 M, satisfies the HHS guidelines for a Silver plan with an Actuarial Value of 71.82%

DC Bronze OAEPO 7500 60% \$45/105 M

## Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

### User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐  
Apply Inpatient Copay per Day? ☐  
Apply Skilled Nursing Facility Copay per Day? ☐  
Use Separate MOOP for Medical and Drug Spending? ☐  
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☒

Desired Metal Tier: **Bronze**

HSA/HRA Options		Tiered Network Option	
HSA/HRA Employer Contribution?	<input type="checkbox"/>	Tiered Network Plan?	<input type="checkbox"/>
Annual Contribution Amount:		1st Tier Utilization:	
		2nd Tier Utilization:	

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$7,500.00	\$850.00			
Coinsurance (%; Insurer's Cost Share)	60.00%	100.00%			
MOOP (\$)	\$9,100.00				
MOOP if Separate (\$)					

[Click Here for Important Instructions](#)

Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
<b>Medical</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$45.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$105.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$27.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$500.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b>Drugs</b>	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$75.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$100.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$150.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

### Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input type="checkbox"/>
Specialty Rx Coinsurance Maximum:	
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

### Plan Description:

Name: DC Bronze OAEPO 7500 60% \$45/105 M  
Plan HIOS ID: 77422DC0110009  
Issuer HIOS ID: 77422  
AVC Version: 2023\_1e

### Output

Status/Error Messages:

Actuarial Value: 65.00%

Metal Tier: Bronze

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0859 seconds

Draft 2023 AV Calculator

This product, DC Bronze OAEPO 7500 60% \$45/105 M, satisfies the HHS guidelines for a Expanded Bronze plan with an Actuarial Value of 65.00%

**Aetna Life Insurance Company**  
**HIOS ISSUER ID: 77422**

**Exhibit 12**  
**Comparison of Key Pricing Factors to LY (2021) Pricing**

Category	2022	2023	% Impact to Premium	Description
Base Experience PMPM*	\$451.96	\$482.29	4.6%	Using all SG experience (HMO/PPO) from DC (20%) and IH (80%)
Pricing Trend (annual)	8.1%	10.6%	10.9%	Using previously approved trend
Morbidity	1.00	1.00	0.4%	No material change projected
Benefit	0.999	1.061	5.6%	Richer portfolio in 2023 compared to 2022
Demographic	1.000	0.886	-10.9%	Expecting shift upward in age/gender mix
Area Factor	1.000	1.000	0.0%	No Change
Other	1.069	0.967	-7.9%	Ben Chg, Ded Supp, etc.
Network Change	1.050	1.056	0.6%	Adj to normalize experience for manual pricing
Risk Adjustment	\$61.60	\$127.74	-10.1%	2023 Projection based on Wakely 2021 Accruals
<b>Projected Claim Cost</b>	<b>\$528.70</b>	<b>\$440.04</b>	<b>-6.8%</b>	
<b>% of Premium Items</b>				
<b>Admin</b>	<b>7.9%</b>	<b>9.5%</b>	<b>0.2%</b>	
<b>Profit</b>	<b>6.0%</b>	<b>6.0%</b>	<b>-0.9%</b>	
FIT	1.26%	1.26%	-0.2%	
AFIT	4.74%	4.74%	-0.7%	
<b>Taxes &amp; Fees</b>	<b>5.4%</b>	<b>5.4%</b>	<b>-0.8%</b>	
Commissions	1.1%	1.4%	0.1%	
Prem Tax	3.4%	3.1%	-0.7%	
HIF	0.0%	0.0%	0.0%	
Federal EUF	0.8%	0.8%	-0.1%	Assuming State Exchange User Fee of 0.825%
State EUF	0.0%	0.0%	0.0%	N/A
Risk Adjustment User Fee	0.1%	0.1%	0.0%	No material change
<b>Total % of Prem</b>	<b>19.27%</b>	<b>20.98%</b>		
<b>Single Risk Pool Premium</b>	<b>\$654.89</b>	<b>\$556.91</b>	<b>-15.0%</b>	Plan Adjusted Markedt Index Rate - Wksht II Field # 3.10
SG Trend Factor	1.008	1.010	0.3%	
Index Rate	\$659.89	\$562.70		
<u>Calibration Factors</u>				
Trend	1.008	1.010		
Age	1.111	0.897		
Area	1.000	1.000		
Tobacco	1.000	1.000		
Avg 1.0 Premium	\$589.32	\$620.63		Calibrated Plan Ajusted Index Rate - Wksht II Field # 3.14
Remove trend factor	\$584.86	\$614.24		
Consumer Premium Relativity	0.840	0.908		
Avg Prem	\$491.07	\$557.48	13.5%	
Premium Mix	1.091	1.009	-7.5%	
<b>Avg Projection Period Premium</b>	<b>\$535.86</b>	<b>\$562.70</b>	<b>5.0%</b>	Ties back to Wksht II Field # 1.13

**Footnotes**

\*Base Experience PMPM for 2022 is 2020 Claims experience used for pricing LY with 1 year of trend to bring the claim level to 2021  
 \*Base Experience PMPM for 2023 is 2021 Claims experience

**Aetna Life Insurance Company**  
**HIOS ISSUER ID: 77422**  
**Rate Change by Plan - Annual**

[illegible]

**RATE FILING REQUIREMENTS INDIVIDUAL AND SMALL GROUP  
PLANS SOLD ON DC HEALTH LINK  
CHECK-LIST**

INSTRUCTIONS: Include all required elements in the table below with the filed rates. The data elements listed in the Actuarial Memorandum should be consistent with the cover letter, if applicable.

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
1	Purpose of Filing	State the purpose of the filing. Identify the applicable law. List the proposed changes to the base rates and rating factors, and provide a general summary.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1
2	Form Numbers	Form numbers should be listed in the actuarial memorandum.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 11
3	HIOS Product ID	The HIOS product ID should be listed in the actuarial memorandum.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1
4	Effective Date	The requested effective date of the rate change. For filings effective 1/1/2017 and later, follow filing due date requirements.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1
5	Market	Indicate whether the products are sold in the individual or small employer group market.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1
6	Status of Forms	Indicate whether the forms are open to new sales, closed, or a mixture of both, and whether the forms are grandfathered, non- grandfathered, or a mixture of both.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1
7	Benefits/Metal level(s)	Include a basic description of the benefits of the forms referenced in the filing and the metal level of each plan design.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1-2
Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
7.1	AV Value	Provide the actuarial value of each plan design using the AV calculator developed and made available by HHS.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 1-2, Exhibit A
8	Average Rate Increase Requested	The weighted average rate increase being requested, incremental and year-over-year renewal. The weights should be based on premium volume. <b>In the small group market, please also provide weighted average rate increase requested for 2023Q1 over 2022Q1; etc.</b>	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 2
9	Maximum Rate Increase Requested	The maximum rate increase that could be applied to a policyholder based on changes to the base rate and rating factors, incremental and year-over-year renewal. (Does not include changes in the demographics of the covered members.)	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 2
10	Minimum Rate Increase Requested	The minimum rate increase that could be applied to a policyholder based on changes to the base rate and rating factors, incremental and year-over-year renewal. (Does not include changes in the demographics of the covered members.)	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 2
11	Absolute Maximum Premium Increase	The absolute maximum year-over-year renewal rate increase that could be applied to a policyholder, including demographic changes such as aging.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 2
12	Average Renewal Rate Increase for a Year	Calculate the average renewal rate increase, weighted by written premium, for renewals in the year ending with the effective period of the rate filing. The calculation must be performed for each HIOS product ID.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 2

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
13	Rate Change History	Rate change history of the forms referenced in the filing. If nationwide experience is used in developing the rates, provide separately the rate history for District of Columbia and the nationwide average rate history.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 2
14	Exposure	Current number of policies, certificates and covered lives.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 3
15	Member Months	Number of members in force during each month of the base experience period used in the rate development and in each of the two preceding twelve-month periods.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 3
16	Past Experience	Provide monthly earned premium and incurred claims for the base experience period used in the rate development and each of the two preceding twelve-month periods.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 3, 10
17	Index Rate	Provide the index rate.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 3
17.1	Rate Development	Show base experience used to develop rates and all adjustments and assumptions applied to arrive at the requested rates. For less than fully credible blocks, disclose the source of the base experience data used in the rate development and discuss the appropriateness of the data for pricing the policies in the filing.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 3-5
18	Credibility Assumption	If the experience of the policies included in the filing is not fully credible, state and provide support for the credibility formula used in the rate development.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 5
19	Trend Assumption	Show trend assumptions by major types of service as defined by HHS in the Part I Preliminary Justification template, separately by unit cost, utilization, and in total. Provide the development of the trend assumptions.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 5-6
20	Cost-Sharing Changes	Disclose any changes in cost sharing for the plans between the base experience period for rating and the requested effective date. Show how the experience has been adjusted for cost- sharing changes in the rate development. Provide support for the estimated cost impact of the cost-sharing changes.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 6
21	Benefit Changes	Disclose any changes in covered benefits for the plans between the base experience period for rating and the requested effective date. Show how the experience has been adjusted for changes in covered benefits in the rate development. Provide support for the estimated cost impact of the benefit changes.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 6

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
22	Plan Relativities	For rate change filings, if the rate change is not uniform for all plan designs, provide support for all requested rate changes by plan design. Disclose the minimum, maximum, and average impact of the changes on policyholders. For initial filings, provide the derivation of any new plan factors.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 6
23	Rating Factors	Provide the age and other rating factors used. Disclose any changes to rating factors, and the minimum, maximum, and average impact on policyholders. Provide support for any changes.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 6, Exhibit 3, Exhibit 7, Exhibit 11
23.1	Wellness Programs	Describe any wellness programs (as defined in section 2705(j) of the PHS Act) included in this filing.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 7
24	Distribution of Rate Increases	Anticipated distribution of rate increases due to changes in base rates, plan relativities, and rating factors. This need not include changes in demographics of the individual or group.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 7, Exhibit A-1
25	Claim Reserve Needs	Provide the claims for the base experience period separately for paid claims, and estimated incurred claims (including claim reserve). Indicate the incurred period used for the base period. Indicate the paid-through date of the paid claims, and provide a basic description of the reserving methodology for claims reserves and contract reserves, if any. Provide margins used, if any.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 7
26	Administrative Costs of Programs that Improve Health Care Quality	Show the amount of administrative costs included with claims in the numerator of the MLR calculation . Show that the amount is consistent with the most recently filed Supplemental Health Care Exhibit or provide support for the difference.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 7
Number	Data Element	Requirement Description	Individual/and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
27	Taxes and Licensing or Regulatory Fees	Show the amount of taxes, licenses, and fees subtracted from premium in the denominator of your medical loss ratio calculation(c). Show that the amount is consistent with the most recently filed Supplemental Health Care Exhibit or provide support for the difference.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 7, Exhibit 6
28	Medical Loss Ratio (MLR)	Demonstrate that the projected loss ratio, including the requested rate change, meets the minimum MLR. Show the premium, claims, and adjustments separately with the development of the projected premium and projected claims (if not provided in the rate development section). If the loss ratio falls below the minimum for the subset of policy forms in the filing, show that when combined with all other policy forms in the market segment in District of Columbia, the loss ratio meets the minimum.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 7, Exhibit 6



Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
29	Risk Adjustment	Provide rate information relating to the Risk Adjustment program. Information should include assumed Risk Adjustment user fees, Risk Adjustment PMPM excluding user fees and assumed distribution of enrollment by risk score, plan, and geographical area. Provide support for the assumptions, including any demographic changes. Provide information/study on the development of risk scores and Risk Adjustment PMPM. Provide previous year-end estimated risk adjustment payable or receivable amount and quantitative support for the amount.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 8
30	Past and Prospective Loss Experience Within and Outside the State	Indicate whether loss experience within or outside the state was used in the development of proposed rates. Provide an explanation for using loss experience within or outside the state.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 9
31	A Reasonable Margin for Reserve Needs	Show the assumed Margin for Reserve Needs used in the development of proposed rates. Margin for Reserve Needs includes factors that reflect assumed contributions to the company's surplus or the assumed profit margin. Demonstrate how this assumption was derived, how the assumption has changed from prior filings, and provide support for changes. If the assumption for Qualified Health Plans exceeds 3% as assumed in the risk corridor formula, justify the excess in light of the company's surplus position.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 8, Exhibit 5
Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
32	Past and Prospective Expenses	Indicate the expense assumptions used in the development of proposed rates. Demonstrate how this assumption was derived. Show how this assumption has changed from prior filings, and provide support for any change. Provide the assumed administrative costs in the following categories: <ul style="list-style-type: none"> <li>Salaries, wages, employment taxes, and other employee benefits</li> <li>Commissions</li> <li>Taxes, licenses, and other regulatory fees</li> <li>Cost containment programs / quality improvement activities</li> <li>All other administrative expenses</li> <li>Total</li> </ul>	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 8, Exhibit 5
33	Any Other Relevant Factors Within and Outside the State	Show any other relevant factors that have been considered in the development of the proposed rates. Demonstrate how any related assumptions were derived. Show how these assumptions have changed from prior filings, and provide support for any change.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 8
34	Other	Any other information needed to support the requested rates or to comply with Actuarial Standard of Practice No. 8.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 9

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
35	Actuarial Certification	Signed and dated certification by a qualified actuary that the anticipated loss ratio meets the minimum requirement, the rates are reasonable in relation to benefits, the filing complies with the laws and regulations of the District of Columbia and all applicable Actuarial Standards of Practice, including ASOP No. 8, and that the rates are not unfairly discriminatory.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_ALIC.pdf- pg 9
36	Part I Preliminary Justification (Grandfathered Plan Filings)	Rate Summary Worksheet --- Provide this document with all Grandfathered plan filings. <b>Provide in Excel and PDF format.</b>	N/A	N/A
36.1	Unified Rate Review Template (Non-Grandfathered Filings)	Unified Rate Review Template as specified in the proposed Federal Rate Review regulation. Provide this document with all Non-Grandfathered plan filings. <b>Provide in Excel and PDF format.</b>	Yes	Supporting Documentaion
37	Part II Preliminary Justification	Written description justifying the rate increase as specified by 45 CFR § 154.215(f). Provide for <i>all</i> individual and small employer group filings (whether or not they are “subject to review” as defined by HHS).	Yes	Supporting Documentation
38	DISB Actuarial Memorandum Dataset	Summarizes data elements contained in Actuarial Memorandum. Provide this document with all Non-Grandfathered plan filings. <b>Provide in Excel format only .</b>	Yes	Supporting Documentation
39	District of Columbia Plain Language Summary	Similar to the Part II Preliminary Justification, this is a written description of the rate increase as specified by 45 CFR § 154.215, but as a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. Provide this document for all individual and small employer group filings.	Yes	Supporting Documentation
40	Summary of Components for Requested Rate Change	DISB will require that issuers provide a chart listing a) any and all components of requested rate changes from the prior year; b) a quick summary/explanation of the change; and c) the actual percentage impact of the change for each component, such that the total for all components listed equals the total percentage change requested for the plan year.	Yes	Supporting Documentation

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
41	CCIO Risk Adjustment Transfer Elements Extract (RATE 'E')	Received directly from CCIO; this report should be completed and submitted by the set deadline for QHP submissions, or by <b>April 30th</b> of the current year, whichever is first.	N/A	N/A
42	Additional Requirements for Stand-Alone Dental Plan Filings	Provide the following for stand-alone dental plan filings: <ul style="list-style-type: none"> <li>• Identification of the level of coverage (i.e. low or high), including the actuarial value of the plan determined in accordance with the proposed rule;</li> <li>• Certification of the level of coverage by a member of the American Academy of Actuaries using generally accepted actuarial principles; and</li> <li>• Demonstration that the plan has a reasonable annual limitation on cost-sharing.</li> </ul>	N/A	N/A

#### CERTIFYING SIGNATURE

The undersigned representative of the organization submitting this rate filing attests that all items contained in the above checklist have been included in the filing to the best of the company's ability.

Joanna Kluza, ASA, MAAA  
 \_\_\_\_\_  
 (Print Name)



\_\_\_\_\_  
 (Signature)

**Aetna Life Insurance Company**  
**HIOS ISSUER ID: 77422**

**Exhibit A**  
**Product Portfolio & Projected Membership Distribution**

<b>HIOS Plan-ID</b>	<b>Network</b>	<b>Plan</b>	<b>Metallic Tier</b>	<b>Actuarial Value</b>	<b>Exchange Offering</b>	<b>Projected Membership</b>
77422DC0110009	PPO	DC Bronze OAEPO 7500 60% \$45/105 M	Bronze	65.00%	Yes	6.36%
77422DC0110003	PPO	DC Gold OAEPO 1650 100% HSA T	Gold	81.35%	Yes	24.15%
77422DC0110005	PPO	DC Gold OAEPO 70% \$25/70 E	Gold	81.61%	Yes	19.02%
77422DC0110002	PPO	DC Gold OAEPO 1500 90% E	Gold	80.77%	Yes	6.36%
77422DC0110010	PPO	DC Gold OAEPO 500 80% \$25/50 M	Gold	81.88%	Yes	41.79%
77422DC0110007	PPO	DC Silver OAEPO 4850 80% \$40/80 M	Silver	71.82%	Yes	1.64%
77422DC0110006	PPO	DC Silver OAEPO 3000 100% HSA E	Silver	71.98%	Yes	0.68%

**Aetna Life Insurance Company**  
**HIOS ISSUER ID: 77422**

**Exhibit 1**  
**2023 Rate Increases by Product**

<b>Product</b>	<b>Average Rate Increase</b>	<b>Minimum Rate Increase</b>	<b>Maximum Rate Increase</b>
ElectChoiceOpenAccess	5.0%	-2.4%	8.7%

Aetna Life Insurance Company  
HIOS ISSUER ID: 77422

Exhibit 2  
Claim Impact due to Demographic Changes

Age	Experience Period Distribution		Experience Demographic Factor		Projected Period Distribution		Projection Demographic Factor	
	Male	Female	Male	Female	Male	Female	Male	Female
0	1.72%	0.84%	1.050	0.939	1.72%	0.84%	1.050	0.939
1	0.74%	0.88%	1.050	0.939	0.74%	0.88%	1.050	0.939
2	0.00%	0.54%	0.601	0.596	0.00%	0.54%	0.601	0.596
3	0.34%	0.49%	0.601	0.596	0.34%	0.49%	0.601	0.596
4	0.00%	0.54%	0.601	0.596	0.00%	0.54%	0.601	0.596
5	0.00%	0.34%	0.570	0.565	0.00%	0.34%	0.570	0.565
6	0.00%	0.39%	0.570	0.565	0.00%	0.39%	0.570	0.565
7	0.00%	0.44%	0.570	0.565	0.00%	0.44%	0.570	0.565
8	0.39%	0.00%	0.570	0.565	0.39%	0.00%	0.570	0.565
9	0.44%	0.29%	0.570	0.565	0.44%	0.29%	0.570	0.565
10	0.00%	0.34%	0.578	0.565	0.00%	0.34%	0.578	0.565
11	0.00%	0.25%	0.578	0.565	0.00%	0.25%	0.578	0.565
12	0.00%	0.00%	0.578	0.565	0.00%	0.00%	0.578	0.565
13	0.00%	0.00%	0.578	0.565	0.00%	0.00%	0.578	0.565
14	0.00%	0.20%	0.578	0.565	0.00%	0.20%	0.578	0.565
1	0.00%	0.10%	0.606	0.615	0.00%	0.10%	0.606	0.615
16	0.00%	0.00%	0.606	0.615	0.00%	0.00%	0.606	0.615
17	0.00%	0.00%	0.606	0.615	0.00%	0.00%	0.606	0.615
18	0.00%	0.00%	0.606	0.615	0.00%	0.00%	0.606	0.615
19	0.25%	0.00%	0.606	0.615	0.25%	0.00%	0.606	0.615
20	0.54%	0.00%	0.451	0.741	0.54%	0.00%	0.451	0.741
21	0.15%	0.00%	0.451	0.741	0.15%	0.00%	0.451	0.741
22	0.54%	1.08%	0.451	0.741	0.54%	1.08%	0.451	0.741
23	0.64%	4.08%	0.451	0.741	0.64%	4.08%	0.451	0.741
24	1.52%	3.29%	0.451	0.741	1.52%	3.29%	0.451	0.741
25	2.11%	3.64%	0.460	1.106	2.11%	3.64%	0.460	1.106
26	3.59%	3.59%	0.460	1.106	3.59%	3.59%	0.460	1.106
27	2.56%	2.90%	0.460	1.106	2.56%	2.90%	0.460	1.106
28	1.92%	1.47%	0.460	1.106	1.92%	1.47%	0.460	1.106
29	1.67%	1.67%	0.460	1.106	1.67%	1.67%	0.460	1.106
30	1.67%	3.73%	0.519	1.197	1.67%	3.73%	0.519	1.197
31	2.51%	3.39%	0.519	1.197	2.51%	3.39%	0.519	1.197
32	1.77%	1.18%	0.519	1.197	1.77%	1.18%	0.519	1.197
33	1.47%	3.73%	0.519	1.197	1.47%	3.73%	0.519	1.197
34	0.64%	1.97%	0.519	1.197	0.64%	1.97%	0.519	1.197
35	1.82%	1.03%	0.630	1.197	1.82%	1.03%	0.630	1.197
36	1.38%	1.23%	0.630	1.197	1.38%	1.23%	0.630	1.197
37	0.15%	0.88%	0.630	1.197	0.15%	0.88%	0.630	1.197
38	0.20%	1.03%	0.630	1.197	0.20%	1.03%	0.630	1.197
39	0.98%	1.28%	0.630	1.197	0.98%	1.28%	0.630	1.197
40	1.28%	0.44%	0.790	1.197	1.28%	0.44%	0.790	1.197
41	0.88%	2.36%	0.790	1.197	0.88%	2.36%	0.790	1.197
42	0.88%	0.44%	0.790	1.197	0.88%	0.44%	0.790	1.197
43	2.01%	0.98%	0.790	1.197	2.01%	0.98%	0.790	1.197
44	1.23%	1.03%	0.790	1.197	1.23%	1.03%	0.790	1.197
45	0.00%	0.79%	1.000	1.269	0.00%	0.79%	1.000	1.269
46	0.00%	0.49%	1.000	1.269	0.00%	0.49%	1.000	1.269
47	0.00%	0.74%	1.000	1.269	0.00%	0.74%	1.000	1.269
48	0.00%	0.29%	1.000	1.269	0.00%	0.29%	1.000	1.269
49	0.44%	0.29%	1.000	1.269	0.44%	0.29%	1.000	1.269
50	0.10%	0.00%	1.370	1.460	0.10%	0.00%	1.370	1.460
51	0.25%	0.00%	1.370	1.460	0.25%	0.00%	1.370	1.460
52	0.59%	0.00%	1.370	1.460	0.59%	0.00%	1.370	1.460
53	0.00%	0.00%	1.370	1.460	0.00%	0.00%	1.370	1.460
54	0.25%	0.84%	1.370	1.460	0.25%	0.84%	1.370	1.460
55	0.10%	0.00%	1.757	1.745	0.10%	0.00%	1.757	1.745
56	0.49%	0.00%	1.757	1.745	0.49%	0.00%	1.757	1.745
57	0.00%	0.00%	1.757	1.745	0.00%	0.00%	1.757	1.745
58	0.25%	0.00%	1.757	1.745	0.25%	0.00%	1.757	1.745
59	0.00%	0.25%	1.757	1.745	0.00%	0.25%	1.757	1.745
60	0.00%	0.44%	2.218	2.128	0.00%	0.44%	2.218	2.128
61	0.00%	0.00%	2.218	2.128	0.00%	0.00%	2.218	2.128
62	0.39%	0.29%	2.218	2.128	0.39%	0.29%	2.218	2.128
63	0.20%	0.93%	2.218	2.128	0.20%	0.93%	2.218	2.128
64	0.15%	0.25%	2.218	2.128	0.15%	0.25%	2.218	2.128
65+	0.54%	0.59%	3.200	2.700	0.54%	0.59%	3.200	2.700

Experience Period Demographic Factor	0.9432
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**Note:**  
Experience Period Demographic Factor computed as the weighted average of gender specific Demographic Factor by current population distribution.

Projected Demographic Factor	0.9432
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**Note:**  
Projected Demographic Factor computed as the weighted average of gender specific Demographic Factor by projected population distribution.

Demographic Change	1.0000
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**Note:**  
Claim Impact due to Demographic Changes computed as the ratio of the Projected Demographic Factor over the Experience Period Demographic Factor.

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Exhibit 3  
Projected Membership Distribution by County

Rating Area	Counties	Experience Period Membership	Experience Period Area Factor	Projected Membership	Projected Area Factor
1	District of Columbia	100%	1.000	100%	1.000

Average Experience Period Area Factor	1.0000
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**Note:**

Average Experience Period Area Factor computed as the weighted average of Experience Period Area Factors by experience period membership distribution.

Average Projected Area Factor	1.0000
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**Note:**

Projected Area Factor computed as the weighted average of Projection Period Area Factors by projected membership distribution.

Area Shift Factor	1.0000
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**Note:**

Area Shift Factor computed as the ratio of the Projected Membership by Area over the Experience Membership by Area Factor represents:

The impact due to the shift of the population distribution across areas.

Area Factor Change	1.0000
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**Note:**

Area Factor Change computed as the ratio of the Projected Area Factor over the Experience Area Factor both using experience membership

Factor represents:

The impact due to cost relativity changes, including changes to provider networks and contracts, from the experience period to the rating period.

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**Exhibit 4**

**Projected Membership and Paid to Allowed by Metal Tier**

<b>Metallic Tier</b>	<b>Projected Membership</b>	<b>Projected Paid to Allowed Ratio</b>
Platinum	0	N/A
Gold	1,335	92%
Silver	34	82%
Bronze	93	72%
Catastrophic	0	N/A
<b>Total</b>	1,462	91%



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**Exhibit 5**  
**Retention as a Percent of Premium and PMPM**

<b>Retention Components</b>	<b>% of Premium</b>	<b>PMPM</b>
<b>Administrative Expense Load</b>	10.96%	\$61.02
<b>Profit &amp; Risk Load</b>	4.74%	\$26.40
Premium Tax	3.12%	\$17.38
State User Exchange Fee	0.83%	\$4.59
Federal Based Exchange Fee	0.00%	\$0.00
HIF	0.00%	\$0.00
Risk Adjustment User Fee and PCORI	0.08%	\$0.45
Federal Income Tax	1.26%	\$7.02
<b>Total Taxes and Fees</b>	5.29%	\$29.44

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**Exhibit 6**  
**MLR Projection**

			<b>Formula</b>
(a)	Premium (pmpm)	\$556.90	
(b)	Medical Cost (pmpm)	\$440.04	
(c)	Medical Benefit Ratio (MBR)	79.0%	= (c) / (b)
(d)	Quality Improvement Action (pmpm)	\$3.34	= (a) x 0.60%
(e)	Taxes and Fees (pmpm)	\$29.44	
(f)	Adjusted Premium (pmpm)	\$527.46	=(a) - (e)
(g)	Adjusted Claims (pmpm)	\$443.38	= (b) + (d)
	<b>Medical Loss Ratio (MLR)</b>	<b>84.1%</b>	=(g) / (f)

Notes:

ACA adjustments for QIA and taxes and fees are estimates based on historical experience and projected expenses.

Values reflect current actuarial projections and will differ from the final reported MLR.

This projection applies to the products included in this filing and is a standalone calculation for the 2023 calendar year. This projection differs from the MLR calculation specified by PPACA which includes three years of experience for all business in the MLR pool.

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**Exhibit 7**  
**Quarterly Trend Factors**

Effective Quarter	Membership	Trend Factor	Index Rate
1Q 2023	77.7%	1.000	\$625.55
2Q 2023	9.5%	1.025	\$641.46
3Q 2023	7.6%	1.052	\$657.78
4Q 2023	5.2%	1.078	\$674.52
Total	100.0%	1.010	\$632.06

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**Exhibit 8**  
**Trend Exhibit**

<b>Service Type</b>	<b>Unit Cost</b>	<b>Utilization</b>	<b>Total Allowed</b>
Facility Inpatient	5.0%	3.0%	8.2%
Facility Outpatient	3.4%	6.5%	10.2%
Physician	1.6%	6.0%	7.7%
Capitation	0.0%	0.0%	0.0%
<b>Medical</b>	2.9%	6.0%	9.1%
Pharmacy	9.9%	2.6%	12.7%
<b>Total (Med + Rx)</b>	4.1%	5.4%	9.7%

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**Exhibit 9**

**Sample Rate Calculation**

The following steps outline the mathematical formula used to develop the member level rates for a sample small group. The input assumptions and the census provided below are for illustrative purposes only.

**Sample Small Group Information:**

Effective Date: 1/1/2023  
Rating Area: Rating Area 1  
Plan: DC Silver OAEPO 4850 80% \$40/80 M

<b><u>Group Census</u></b>	<b>Employee Age</b>	<b>Spouse Age</b>	<b>Child 1 Age</b>	<b>Child 2 Age</b>	<b>Child 3 Age</b>
Employee 1	35	36	5	7	
Employee 2	56	52			
Employee 3	24	21			
Employee 4	52	49	19	17	16
Employee 5	65	65	25		
Employee 6	58	60	24		
Employee 7	56	51			
Employee 8	42	41			
Employee 9	33	34	5	6	7
Employee 10	25	28	2	1	

**Age and Tobacco**

**Factors**

	<b>Age Factors</b>				
	<b>Employee</b>	<b>Spouse</b>	<b>Child 1</b>	<b>Child 2</b>	<b>Child 3</b>
Employee 1	0.876	0.896	0.654	0.654	
Employee 2	1.801	1.545			
Employee 3	0.727	0.727			
Employee 4	1.545	1.377	0.654	0.654	0.654
Employee 5	2.181	2.181	0.727		
Employee 6	1.944	2.099	0.727		
Employee 7	1.801	1.487			
Employee 8	1.053	1.013			
Employee 9	0.836	0.856	0.654	0.654	0.654
Employee 10	0.727	0.744	0.654	0.654	

### Calculation of Monthly Premium

Step 1: Multiply Market Base Rate x Rating Area Factor x Plan Factor x Effective Date Factor

Market Base Rate =	\$683.81
x Rating Area Factor (Rating Area 1)	1.0000
x Plan Factor	0.7089
x Effective Date Factor	1.0000
Market Base Rate adjusted for Plan/Area/Effective Date =	\$484.78

Step 2: Multiply Adjusted Market Base Rate in Step 1 by the Member level Age and Tobacco Factors:

Member Monthly Rates	Employee	Spouse	Child 1	Child 2	Child 3	Total
Employee 1	\$424.67	\$434.36	\$317.05	\$317.05		\$1,493.13
Employee 2	\$873.09	\$748.99				\$1,622.08
Employee 3	\$352.44	\$352.44				\$704.88
Employee 4	\$748.99	\$667.54	\$317.05	\$317.05	\$317.05	\$2,367.68
Employee 5	\$1,057.26	\$1,057.26	\$352.44			\$2,466.96
Employee 6	\$942.41	\$1,017.56	\$352.44			\$2,312.41
Employee 7	\$873.09	\$720.87				\$1,593.96
Employee 8	\$510.47	\$491.08				\$1,001.55
Employee 9	\$405.28	\$414.97	\$317.05	\$317.05	\$317.05	\$1,771.40
Employee 10	\$352.44	\$360.68	\$317.05	\$317.05		\$1,347.22
<b>Group Total Monthly Premium:</b>						<b>\$16,681.27</b>

Note: Member level monthly rates are rounded to the nearest penny.

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Exhibit 10  
Plan Mapping

2021 HIOS Plan ID	2021 Plan Name	2022 HIOS Plan ID	2022 Plan Name	2023 HIOS Plan ID	2023 Plan Name
77422DC0110001	DC Bronze OAEPO 6000 80% \$15/50 E	77422DC0110001	DC Bronze OAEPO 6000 80% \$15/50 E	77422DC0110009	DC Bronze OAEPO 7500 60% \$45/105 M
77422DC0110002	DC Gold OAEPO 1500 90% E	77422DC0110002	DC Gold OAEPO 1500 90% E	77422DC0110002	DC Gold OAEPO 1500 90% E
77422DC0110003	DC Gold OAEPO 1650 100% HSA T	77422DC0110003	DC Gold OAEPO 1650 100% HSA T	77422DC0110003	DC Gold OAEPO 1650 100% HSA T
77422DC0110004	DC Gold OAEPO 500 90% \$25/40 E	77422DC0110004	DC Gold OAEPO 500 90% \$25/40 E	77422DC0110010	DC Gold OAEPO 500 80% \$25/50 M
77422DC0110005	DC Gold OAEPO 70% \$25/40 E	77422DC0110005	DC Gold OAEPO 70% \$25/40 E	77422DC0110005	DC Gold OAEPO 70% \$25/70 E
77422DC0110008	DC Silver OAEPO 2800 90% HSA E	77422DC0110006	DC Silver OAEPO 3000 100% HSA E	77422DC0110006	DC Silver OAEPO 3000 100% HSA E
77422DC0110006	DC Silver OAEPO 3000 100% HSA E	77422DC0110006	DC Silver OAEPO 3000 100% HSA E	77422DC0110006	DC Silver OAEPO 3000 100% HSA E
77422DC0110007	DC Silver OAEPO 4800 80% \$25/45 E	77422DC0110007	DC Silver OAEPO 4800 80% \$25/45 E	77422DC0110007	DC Silver OAEPO 4850 80% \$40/80 M

**Aetna Life Insurance Company**  
**HIOS ISSUER ID: 77422**

**Exhibit 11**  
**Projected Age/Gender Distribution**

Age	Male	Female	DC Age Factor
0-14	3.64%	5.55%	0.654
15	0.00%	0.10%	0.654
16	0.00%	0.00%	0.654
17	0.00%	0.00%	0.654
18	0.00%	0.00%	0.654
19	0.25%	0.00%	0.654
20	0.54%	0.00%	0.654
21	0.15%	0.00%	0.727
22	0.54%	1.08%	0.727
23	0.64%	4.08%	0.727
24	1.52%	3.29%	0.727
25	2.11%	3.64%	0.727
26	3.59%	3.59%	0.727
27	2.56%	2.90%	0.727
28	1.92%	1.47%	0.744
29	1.67%	1.67%	0.760
30	1.67%	3.73%	0.779
31	2.51%	3.39%	0.799
32	1.77%	1.18%	0.817
33	1.47%	3.73%	0.836
34	0.64%	1.97%	0.856
35	1.82%	1.03%	0.876
36	1.38%	1.23%	0.896
37	0.15%	0.88%	0.916
38	0.20%	1.03%	0.927
39	0.98%	1.28%	0.938
40	1.28%	0.44%	0.975
41	0.88%	2.36%	1.013
42	0.88%	0.44%	1.053
43	2.01%	0.98%	1.094
44	1.23%	1.03%	1.137
45	0.00%	0.79%	1.181
46	0.00%	0.49%	1.227
47	0.00%	0.74%	1.275
48	0.00%	0.29%	1.325
49	0.44%	0.29%	1.377
50	0.10%	0.00%	1.431
51	0.25%	0.00%	1.487
52	0.59%	0.00%	1.545
53	0.00%	0.00%	1.605
54	0.25%	0.84%	1.668
55	0.10%	0.00%	1.733
56	0.49%	0.00%	1.801
57	0.00%	0.00%	1.871
58	0.25%	0.00%	1.944
59	0.00%	0.25%	2.020
60	0.00%	0.44%	2.099
61	0.00%	0.00%	2.181
62	0.39%	0.29%	2.181
63	0.20%	0.93%	2.181
64	0.15%	0.25%	2.181
65+	0.54%	0.59%	2.181

<b>Age Calibration Factor</b>	0.897
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**Note:**

Age Calibration Factor  
computed as the weighted average of  
HHS Age Factor by projected membership  
distribution.

<b>Weighted Average Age</b>	36
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**Note:**

This is the age that most closely  
corresponds to the age calibration factor.



**Aetna Life Insurance Company – District of Columbia**  
**1Q23 Filing - Small Group Business**  
**HIOS product ID: 77422DC011**  
**Actuarial Memorandum**

**Statement of Purpose for Filing**

This actuarial memorandum supports Aetna Life Insurance Company commercial base rates for District of Columbia small groups effective beginning January 1, 2023. The purpose of this memorandum is to comply with the District of Columbia, Department of Insurance, Securities and Banking, Health Insurance Rate Filing Procedures and to provide adequate supporting information for our proposed rates pursuant to the DC Official Code, Title 31, Subtitle IV, Chapter 34.

The requested rates have been developed incorporating consideration of the market changes and rating requirements taking effect in the Small Group market pursuant to the Patient Protection and Affordable Care Act of 2010 and subsequent regulation. They are compliant with all rating limitations under federal and state regulation. The plan designs contained in this submission are to be sold on the Exchange.

The descriptions and analyses presented in this rate filing reflect our current understanding of regulations and guidance. As further guidance is received, we reserve the right to submit revisions or withdraw this rate filing.

**Summary of Changes from prior filing and rate manual**

We are proposing to revise the quarterly premium rates for effective dates from January 1, 2023 through December 31, 2023. The quarterly rate increases are reflected in Exhibit 7. Generally, rate changes do not vary by plan design, with the exception of the impact associated with plan-specific benefit modifications necessary to comply with Actuarial Value requirements.

Rates for the plans in this submission are being revised to reflect 1) the impact of updated experience data and medical claim trend and 2) changes in cost-sharing levels to ensure that plans comply with Actuarial Value requirements.

There are no other proposed changes for this submission.

**Form Numbers**

An exhibit showing the Form Numbers is shown on under the "Certificate of Form Names and Numbers" Exhibit of this Actuarial Memorandum.

**Status of Forms**

The forms for this submission are "open to new sales" and "non-grandfathered".

**Description of Benefits/Metal Levels and Actuarial Values**

This filing covers PPO group medical benefit coverage. The range of coverage includes inpatient, outpatient, primary care, specialist services, pharmacy, DME, and vision. Information on the cost-sharing parameters of the covered benefit plans, including deductibles and copays, can be found in the Schedule of Benefits in the Form filing (AETN-133139941). All benefits are compliant with state mandates and the requirements of the Patient Protection and Affordable Care Act of 2010, including preventive care benefits, deductible limits, and Actuarial Value requirements.

Exhibit A shows the metal level and actuarial value for each plan design using the AV calculator developed and made available by HHS.

### Average Rate Increase Requested

The following tables provide the requested weighted average increases. The first table shows the incremental rate change and the second table shows the year over year rate change.

	1Q23/4Q22	2Q23/1Q23	3Q23/2Q23	4Q23/3Q23
<b>Incremental Rate Increase</b>	-1.26%	2.54%	2.54%	2.54%

	1Q23/1Q22	2Q23/2Q22	3Q23/3Q22	4Q23/4Q22	<b>Average</b>
<b>Requested Rate Increase</b>	4.77%	5.33%	5.90%	6.46%	5.01%

### Maximum Rate Increase Requested

The maximum rate increase that could be applied to a policyholder based on changes to the base rate and rate factors is 10.17%. This rate increase applies to members renewing in 4Q23 for the DC Silver OAEPO 4850 80% \$40/80 M plan (HIOS ID 77422DC0110007).

### Minimum Rate Increase Requested

The minimum rate increase that could be applied to a policyholder based on changes to the base rate and rate factors is -2.57%. This rate increase applies to members renewing in 1Q23 for the DC Silver OAEPO 3000 100% HSA E plan (HIOS ID 77422DC0110006).

### Absolute Maximum Premium Increase

The absolute maximum year-over-year renewal rate increase that could be applied to a policyholder, including demographic changes like aging, is 22.47%. This rate increase applies to members renewing in 1Q23 for DC Silver OAEPO 4850 80% \$40/80 M plan (HIOS ID 77422DC0110007) that age up from 20 to 21.

### Average Renewal Rate Increase for a Year

The average renewal rate increase, weighted by written premium, for renewals in the year ending with the effective period of the rate filing is 5.01%

### Rate Change History

The rate change history for the forms referenced in the filing is shown below.

Rate Effective Date	Annual Total Change
4Q21	4.9%
1Q22	8.0%
2Q22	7.2%
3Q22	6.4%
4Q22	5.7%

## Exposure

The current exposure as of December 2021 is 31 policies, 199 certificates, and 236 covered lives.

## Member Months

The numbers of members in force during each month of the base experience used in the rate development and for the preceding 12-month period for the forms referenced in this filing are shown in the Loss Ratio History Exhibit of the Actuarial Memorandum.

## Past Experience

The monthly earned premium and incurred claims for the base experience period used in the rate development and for the preceding 12-month period for the forms referenced in this filing are shown in the Loss Ratio History Exhibit of the Actuarial Memorandum.

## Index Rate

The index rate = \$625.55

## Rate Development

### Determination of Claim Portion of Market Index Rate

In setting the projected claim level in the market in 2023, we based our projections upon the 2020 and 2021 experience of our current ACA small group block of business for Innovation Health Plan, Inc. and Innovation Health Insurance Company, in the 2-50 market. The experience data utilized in the rate development reflects incurred claims from January 1, 2020 to December 31, 2021 and paid through March 2022. This manual experience is the HMO Small Group Experience for Innovation Health Plan, Inc. and PPO Small Group Experience for Innovation Health Insurance Company in Northern Virginia.

The manual experience used to develop the rates is shown below:

DOS	Membership	Claims	Premium *	Loss Ratio
1/1/2021	3,436	1,248,219	2,038,508	61.23%
2/1/2021	3,380	1,417,148	2,002,428	70.77%
3/1/2021	3,307	1,501,896	1,965,240	76.42%
4/1/2021	3,191	1,019,792	1,897,964	53.73%
5/1/2021	3,129	1,131,505	1,861,325	60.79%
6/1/2021	3,059	1,393,598	1,825,360	76.35%
7/1/2021	2,984	966,762	1,772,846	54.53%
8/1/2021	2,945	1,182,812	1,750,802	67.56%
9/1/2021	2,894	1,296,500	1,721,659	75.31%
10/1/2021	2,820	1,211,818	1,681,445	72.07%
11/1/2021	2,788	3,905,124	1,662,300	234.92%
12/1/2021	2,679	1,428,778	1,595,837	89.53%
Total	36,612	17,703,952	21,775,713	81.30%

\*Note: Premiums shown are not risk adjusted. The current estimate of the 2021 risk-adjusted loss ratio is 81.9%.

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

As noted above, the experience period reflects three month of paid claim run-off. The IBNR reserves account for approximately 1.60% of the experience period incurred claims.

For the projection, the following was taken into consideration:

A. Changes in the Morbidity of the Population Insured:

The experience period data includes experience for policies issued to small employers in 2020 and 2021. We considered the expected relationships between the morbidity of the experience policies and the likely population that will be covered by Small Group Single Risk Pool policies in 2023.

B. Changes in Benefits:

The products included in this filing include benefits necessary to comply with the Essential Health Benefit requirements. The experience data includes experience for Single Risk Pool products that have essentially identical benefits.

The change in projected utilization due to changes in benefits is also considered. As cost sharing decreases (measured by increasing Actuarial Value), utilization increases. This pattern is reflected in the factors that are built into the federal risk adjustment mechanism that started in 2014. The federal risk adjustment program factors and other proprietary models were considered in the development of the utilization change. The average cost sharing in the experience period was compared with the average cost sharing in the projection period. From the average cost sharing change, an expected utilization change was derived.

C. Changes in Demographics:

Experience data was normalized for projected changes in the age/gender mix and area mix using internally-developed factors. Exhibits 2 and 3 contain detail on the calculations of the impact of demographic mix shifts.

D. Other Adjustments:

The 'Other' adjustment includes the projected impact of changes in network composition and provider contracts.

Determination of Retention Portion of Market Index Rate

The retention portion of the projected premium is illustrated in Exhibit 5.

The prospective general and administrative expenses are based on historical corporate small group market expense levels, current-year projections, and projected changes in expenses, inflation, and membership for 2023. The commission expense factor covers anticipated sales and marketing expenses. Those may include, without limitation, purchase of television, internet, and other advertising; payments of commissions and other incentive compensation to Company's internal sales force; and payment of commissions to external brokers. The exact amounts and distribution among the categories of sales and marketing expenses will depend on a variety of factors including competitive conditions, business strategy, consumer behaviors, and legal and regulatory requirements. The consumer behaviors would capture whether they use a particular distribution channel, commissioned or not, as well as their experience.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax. The risk adjustment user fee is applied to the

projected risk adjustment transfer and therefore, excluded from the taxes and fees shown under non-benefit expenses. State premium taxes are estimated on most current known levels and include any known assessments.

The profit and risk load is consistent with the target used in our initial pricing of 2022.

Aetna recognizes that COVID-19 has had an impact on the level of allowed and incurred claims in the experience period of January 1, 2020 through December 31, 2021. We have internally developed factors to adjust the experience, using calendar year 2019 experience as our baseline claims data. Adjustment factors for allowed claims and incurred claims were developed separately and have been applied as such. These factors were developed using experience paid-thru January 31, 2022.

### **Requested Rates**

Rates are determined using the prescribed member build-up approach. In the event that a family includes more than three dependents under age 21, only the three oldest dependents will be considered in determining the family's premium. Additional dependents (non-billable members) will not be included in the rate calculation.

The premium for each billable member is calculated as:

Calibrated Plan Adjusted Index Rate \* Age Factor \* Area Factor \* Trend Factor

The resulting rate is rounded to the nearest cent, and rates are then summed for all billable family members.

An example of a contract's premium determined by the member build-up calculation is shown in Exhibit 9.

### **Credibility Assumption**

Experience data for the District of Columbia is assigned 20% credibility.

### **Trend Assumption**

Anticipated annual trend from the experience period to the rating period for the product line is shown in the following table. The table shows the trend assumptions by major types of service as defined by HHS, separately by unit cost, utilization, and in total.

<b>Type of Service</b>	<b>Unit Cost</b>	<b>Utilization</b>	<b>Total</b>
Inpatient Hospital	5.0%	3.0%	8.2%
Outpatient Hospital	3.4%	6.5%	10.2%
Professional	1.6%	6.0%	7.7%
Other Medical	3.4%	6.5%	10.2%
Capitation	0.0%	0.0%	0.0%
Prescription Drug	9.9%	2.6%	12.7%
<b>Total</b>	<b>4.1%</b>	<b>5.4%</b>	<b>9.7%</b>

#### **a. Medical Trend**

Allowed medical trend includes known and anticipated changes in provider contract rates, severity and medical technology impacts, and expected changes in utilization. The impact of benefit leveraging is accounted for separately in the projected paid to allowed ratio.

b. Pharmacy Trend

Pharmacy trend considers the impact of formulary changes, patent expirations, new drugs, other general market share shifts, and overall utilization trend.

### **Cost-sharing changes & Benefit Changes**

Aetna's rate review models project incurred claims and earned premiums assuming a static benefit plan mix for the book of business for the experience period. Since Aetna prices the book of business utilizing a target loss ratio approach, adjustments made to the incurred claims and earned premiums to account for the anticipated changes to the plan mix would offset resulting in the same projected loss ratio. The Plan Relativity Factors adjust future premium levels to align with the expected claims for changes in plan mix for future dates of service.

### **Plan Relativities**

The Plan Relativities represent the expected value of the difference in benefits and networks between the market index rate and each additional proposed benefit plan discussed in this filing. The relativities were developed using a proprietary pricing model which relies on State- and product-specific benefit service category weights and rating factors for various levels of plan/member cost-sharing options for deductibles, coinsurance, out-of-pocket maximums and copays.

The product-specific service category weights were developed based on the experience of Aetna's Small Group block of business. The cost-sharing-specific rating factors were developed using experience associated with our Large Group block of business, which excludes the effects of selection. These Large Group based cost-sharing specific rating factors account for differences in a standard population's spending patterns due to differences in the richness and/or structure of benefits, or induced demand, without reflection of differences in health status.

Final plan relativities reflect the value of the EHB and state mandated benefits (including pediatric dental), incorporating the impact of out-of-network benefits and additional benefits. The methodology also considers the value of any differences in network by plan, including but not limited to network discounts and steerage.

### **Rating Factors**

#### Effective Date Factors

Exhibit 7 illustrates the quarterly trend factors, the resulting index rate for effective dates during each calendar quarter, the projected membership distribution by effective date, and the weighted-average index rate. Trend factors are developed from annual forward trend and leveraging. A trend factor of 1.00 corresponds to a policy period that begins January 1, 2023.

#### Member Age Factor

The age factors are based on the DC specific age scale. The factors are shown in Exhibit 11.

#### Tobacco Factors

No load is proposed for tobacco users.

#### Area Factors

Exhibit 3 summarizes the rating area definitions and factors and displays the projected membership by area to develop the projected average area factor. The geographic calibration factor is the reciprocal of the projected average area factor.

## Wellness Programs

Aetna may encourage and incent members to access certain medical services, to use online tools that enhance their coverage and services, and to continue participation as an **Aetna** member. Members and their doctor can talk about these medical services and decide if they are right for the member. Aetna may also encourage and incent members in connection with participation in a wellness or health improvement program. Incentives include but are not limited to:

- Modification to **copayment, deductible or coinsurance** amounts
- **Premium** discounts or rebates
- Contributions to health savings account
- Fitness center membership reimbursement
- Merchandise
- Coupons
- Gift cards
- Debit cards
- Any combination of the above

The award of any such incentive shall not depend upon the result of a wellness or health improvement activity or upon a member's health.

## Distribution of Rate Increases

The distribution of rate increases (annual) is shown in Exhibit A-1. The increases are shown by Plan.

## Claim Reserve Needs

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

The experience data reflects incurred claims from January 1, 2021 through December 31, 2021 and paid through March 31, 2022. The paid claims for the DC Base experience period are \$1,023,928. The estimated incurred claims are \$1,040,527.

## Administrative Costs of Programs that Improve Health Care Quality

The administrative costs included with claims in the numerator of the MLR calculation are shown in Exhibit 6 (MLR Projection).

## Taxes and Licensing or Regulatory Fees

The taxes, licenses and fees removed from premium in the denominator of the MLR calculation are shown in Exhibit 6 (MLR Projection).

## Medical Loss Ratio (MLR)

The projected Medical Loss Ratio (MLR) as defined by HHS is 84.1% and meets the minimum MLR requirements of Insurance Art. § 15-605(c). The details of the MLR calculation are shown in Exhibit 6 (MLR Projection).

**Risk Adjustment****Risk Adjustment – Experience Period**

Risk Adjustment transfer is accrued at the issuer and market level based on 2021 CMS Interim data. The transfer is allocated to the member-level based by applying the HHS risk transfer calculation to each member relative to the imputed market average; such that members with higher resulting relative transfer scores may have a receivable and members with lower resulting scores may have a payable, regardless of the net market risk transfer result. The resulting member transfers are summed to the HIOS plan level and adjusted for 2021 Risk Adjustment fees of \$0.25 PMPM in Worksheet 2.

**Risk Adjustment – Projection Period**

Aetna is projecting a risk adjustment receivable. We expect that we will have membership enrolled under the market average morbidity. The resulting PMPM adjustment, net of risk adjustment user fees, is \$127.74 PMPM.

**Reinsurance**

Transitional Reinsurance recoveries do not apply to Small Group business. The experience period data does not contain Reinsurance Contributions during 2021.

**Risk Corridor**

The Risk Corridor program does not apply to Small Group business.

**Past and Prospective Loss Experience Within and Outside the State**

The loss experience used in the development of the rates was based on the HMO Small Group experience for Innovation Health Plan, Inc. and PPO Small Group experience for Innovation Health Insurance Company in Northern Virginia.

**Reasonable Margin for Reserve Needs & Past and Prospective Expenses**

The retention portion of the projected premium is illustrated in Exhibit 5.

The prospective general and administrative expenses are based on historical corporate small group market expense levels, current-year projections, and projected changes in expenses, inflation, and membership for 2023. The commission expense factor covers anticipated sales and marketing expenses. Those may include, without limitation, purchase of television, internet and other advertising; payments of commissions and other incentive compensation to the Company's internal sales force; and payment of commissions to external brokers. The exact amounts and distribution among the categories of sales and marketing expenses will depend on a variety of factors including competitive conditions, business strategy, consumer behaviors, and legal and regulatory requirements. The consumer behaviors would capture whether they use a particular distribution channel, commissioned or not, as well as their experience.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax. State premium taxes are estimated on most current known levels and include any known assessments.

The profit and risk load is consistent with the target used in the initial pricing for our 2022 plans.



**Any Other Relevant Factors Within and Outside the State**

All relevant Factors within and outside the State have been considered in the development of the proposed rates.

**Any other information needed to support the requested rates or to comply with Actuarial Standard of Practice No. 8**

This filing is in conformity with all the applicable Actuarial Standards of Practice, including ASOP No. 8.

**Actuarial Certification**

I, Joanna Kluza, am an employee of Aetna Inc. and a member of the American Academy of Actuaries. I have reviewed the enclosed rates submitted by Aetna Life Insurance Company for the District of Columbia.

These rates reflect the negotiated prices from the provider contracts and the expected utilization experience of the plan.

I relied upon financial records and summaries prepared by responsible officers and employees of Aetna Life Insurance Company. In other respects, my analysis included review of assumptions that I considered necessary.

For preparation of the rates, items identified above:

- (i). are computed in accordance with commonly accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles,
- (ii). meet the requirements of Washington D.C,
- (iii). make a good and sufficient provision for all unpaid claims of the organization under the terms of its contracts and agreements, and
- (iv). include appropriate provision for all actuarial items which ought to be established where allowed by law.

A target medical loss ratio of 79.0% was used for this filing calculated in the traditional way. The expected 2023 MLR for this filing, as defined by PPACA and before any credibility adjustment, is 84.1%.

These rates are appropriate for quotes delivered for effective dates beginning January 1, 2023. The proposed change is an increase that is not greater than the 15% threshold and will not trigger the federal review requirements as specified under 45 CFR Part 154.

This rate filing conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010.

In my opinion, the enclosed rates are reasonable in relation to the anticipated experience of Aetna Life Insurance Company. They are neither excessive nor inadequate, nor unfairly discriminatory.



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Joanna Kluza, ASA, MAAA  
Aetna Life Insurance Company

May 2, 2022  
Date

**District of Columbia Small Group  
ALIC (PPO plans) Loss Ratio History**

DOS	Membership	Claims	Premium*	Loss Ratio
1/1/2020	179	126,572	89,780	91.13%
2/1/2020	173	131,830	88,004	80.25%
3/1/2020	168	47,325	85,546	71.83%
4/1/2020	167	82,875	85,482	61.25%
5/1/2020	169	73,838	87,344	75.05%
6/1/2020	168	158,791	86,813	67.64%
7/1/2020	169	205,208	86,891	59.24%
8/1/2020	175	283,400	88,458	54.64%
9/1/2020	175	162,489	90,464	58.90%
10/1/2020	181	147,758	93,421	47.42%
11/1/2020	148	55,358	71,692	46.16%
12/1/2020	149	68,301	72,337	60.02%
1/1/2021	149	53,271	74,354	71.65%
2/1/2021	153	76,124	76,206	99.89%
3/1/2021	155	97,466	77,095	126.42%
4/1/2021	156	97,431	77,496	125.72%
5/1/2021	165	80,188	82,195	97.56%
6/1/2021	181	78,207	87,931	88.94%
7/1/2021	184	159,900	90,293	177.09%
8/1/2021	176	59,479	86,680	68.62%
9/1/2021	181	78,012	87,386	89.27%
10/1/2021	178	79,166	87,077	90.91%
11/1/2021	183	103,551	90,295	114.68%
12/1/2021	174	77,733	83,580	93.00%
CY2020	2,021	1,543,744	1,026,232	150.43%
CY2021	2,035	1,040,527	1,000,586	103.99%

\*Note: Premiums shown are not risk adjusted. The current estimate of the 2021 risk adjusted loss ratio is 85.0%.

**Certificate Form Names and Numbers**

<i>Form Name</i>	<i>Form Number</i>
AL DC SG HHIX COC-EPO V007	AL SG HCOC-2023-EPO 07-HIX
Policy	AL SG HGrpPol-1A 01

**Schedule Form Names and Numbers**

<i>Form Name</i>	<i>Form Number</i>
AL DC SG-HIXSOB-14050619 V007	AL DC SG HIX SOB EPO 14050619
AL DC SG-HIXSOB-14050613 V007	AL DC SG HIX SOB EPO 14050613
AL DC SG-HIXSOB-14050616 V007	AL DC SG HIX SOB EPO 14050616
AL DC SG-HIXSOB-14051067 V007	AL DC SG HIX SOB EPO 14051067
AL DC SG-HIXSOB-14051068 V007	AL DC SG HIX SOB EPO 14051068
AL DC SG-HIXSOB-14051066 V007	AL DC SG HIX SOB EPO 14051066
AL DC SG-HIXSOB-14050619 V007	AL DC SG HIX SOB EPO 14050614